

Signature of Cardholder

ACADEMY OF LIFE UNDERWRITING WEBINAR ORDER and PAYMENT FORM

Name (First, Middle, Last or Family Nam	e)				
Company Name					
Shipping Address (Do Not Use Post Offic	e Box Address)				
Shipping Address (Continued)					
City & State 0r Province		Postal Code	Country		
Business Telephone	Business	Email Address			
ITEM DESCRIPTION			QUANTITY	PRICE ¹	SUBTOTAL
WEBINAR PROGRAMS					
Webinar Subscription Series					
Individual				\$100.00	
2-50 Underwriters				\$350.00	
51- or More Underwriters				\$700.00	
Special Series: Introduction to Basic EKG Tutorial				\$50.00	
				TOTAL ¹	
orices are shown in US\$; the Academy of	Life Underwriting can o	nly accept payment in US F	unds.		
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Credit Card: ☐ American Express ☐ MasterCard ☐ VISA			Check or Money Order in US Funds		
Credit Card Number:			payable to "Academy of Life Underwriting";		
Expiration Date:/	Security Code*:		must be enclo	sed with this f	f <u>orm</u> .
its printed on front of American Express	or last 3 digits on back o	of Master Card or VISA)		_	
			Send Forms	-	
			Academy of Li		_
			1800 M Street	NW. Suite 40	0 South

Contact Us: Phone: (202) 495-3130 Email: registrar@alu-web.com Website: www.alu-web.com

Washington, DC 20036 USA

Print Name of Cardholder