REGISTRATION SLIP FOR AGENTS

PLEASE PRINT LEGIBLY TO ASSURE PROPER CREDIT

DAT	T7 .	
114	HO.	

THE PRICE IS \$45 PER COURSE / TAKE ALL SIX FOR \$225 (GET ONE FREE!)

AMOUNT PAID	\$BY: CHECK#	C	ASH 🗆 MONI	EY ORDER #	and the state of t		
☐ CHECK HERE IF YOU WISH TO PAY WITH CREDIT OR DEBIT CARD							
AND AN INVOICE WILL BE E-MAILED TO YOU							
THE CLASSES BELOW ARE HELD IN ORDER ON TUES., WED. & THURS. (8:30AM & 1:00PM)							
PLEASE FILL IN DATE FOR EACH DESIRED CE COURSE (YOU CANNOT REPEAT THE SAME COURSE NUMBER IN THE PAST 24 MONTHS)							
TUES. / DATE: WHAT INS. ETHICS IS ABOUT WITH CASE STUDIES / 4-HOURS ETHICS / COURSE # 142854							
TUES. / DATE:	A 4-HOUR FOLLOW-UP	LTCP CE COURS	SE / 4-HOURS	L&H / LTCP / # 6	000102497		
WED. / DATE:	BASICS OF SOCIAL SEC	CURITY / 4-HOUR	S L&H / COUR	SE # 6000097812			
WED. / DATE:	MEDICARE A&B, ADVAN	TAGE PLANS AND	MEDIGAP/4-1	HOURS L&H / CO	URSE # 6000099975		
THURS. / DATE: AGENTS & BROKERS E&O INS. W/CASE STUDIES / 4-HOURS P&C / COURSE # 145092							
THURS. / DATE: PERSONAL AUTO INS. W/CASE STUDIES / P&C COURSE # 145100							
PLEASE PRINT NAME AS LISTED ON INSURANCE LICENSE							
LAST NAME:		FIRST NAME:			M.I		
MAILING ADDRESS:	, , ,	CITY:	· · · · · · · · · · · · · · · · · · ·	STATE:	ZIP:		
BEST PHONE NUMBER FOR CONTACT: ()							
E-MAIL ADDRESS:							
NATIONAL PRODUCER NUMBER: BIRTH MONTH: ODD/EVEN BIRTH YEAR:							

P.A.I.R.,Inc. 308 Wellington Way Central, SC 29630 S.C.D.O.I. Approved C.E. Sponsor #160277 (864) 593-9323

E-mail: tjpair@gmail.com

Please complete and mail to the above address or email to tjpair@gmail.com CHECK OUR WEB SITE: www.scpair.com OR E-MAIL tjpair@gmail.com