

Insurance Continuing Education Featuring Bob Loonan!

Sponsored by



St Cloud - Willmar - Brainerd

Spring 2012 Session - 8 Credits

<p>AM Session <u>4 credits</u></p>	<p>Homeowners Insurance, a review of definitions - 8:00 AM - 12:00 PM This course will examine the important definitions in a homeowners insurance policy. We will discuss how these pertain to the perils covered and exclusions that are not covered. We will also be looking at the differences between different policies with different insurance companies.</p>
<p>PM Session <u>4 credits</u></p>	<p>Boat insurance - 12:00 PM - 4:00 PM We are coming up on that time of year. Boat coverage has unique aspects to it that are important to know. Because we don't work with this product year round it is hard to stay on top of what is covered and what is not. Make sure your client is making informed decisions about their boat coverage.</p>

Offered at 3 locations!

Tuesday, March 13th, 2012
Holiday Inn & Willmar Conference Center
2100 E Hwy 12
Willmar, MN 56201
320-235-6060

Wednesday, March 14th, 2012
Holiday Inn & Suites St Cloud
75 South 37th Avenue
St. Cloud, MN 56301
320-253-9000

Thursday, March 15th, 2012
Brainerd Hotel & Conference Center
2115 South 6th Street
Brainerd, MN 56401
218-829-1441

Questions? Please contact:

Hillari Miller - 320-260-0076 Dean Kilau - 320-980-5264



Brainerd Willmar St Cloud **CE Registration – Spring 2012**

(Place a check mark in box of the CE location that you will attend)

Name _____ (as it appears on license)

Insurance Agency Name _____ Phone _____

Minnesota Insurance License Number _____

I will attend the **AM Session** ____ I will attend the **PM Session** ____ I will attend **both** ____

I will be attending the complimentary luncheon. ____ Yes ____ No

The fee is **\$50** for the entire day or **\$25** for **per session**. You may include a personal check payable to City Auto Glass with this form and mail to City Auto Glass, 1036 33rd St S, St Cloud, MN 56301. Or fill in the credit card information and fax to (320) 240-9609. **Your credit card will not be charged until after the event date.**

Visa, MC, or Discover Card # _____ Exp Date _____
(circle card type)

Cardholder Name _____

Billing Address _____ Zip _____
(as it appears on your credit card statement)

Cardholder Signature _____ CVV# _____
(last 3 digits of the number on the back of card)