



bulletproof strategies in uncertain times

The Health Care Reform Law Has Generated A Great Deal Of Confusion And Uncertainty Making It Very Difficult For Insurers To Decide On What They Should Be Doing RIGHT NOW To Best Protect Themselves. This Innovative Seminar Provides Highly Effective Strategies That Insurers Can Implement ASAP To Reduce Their Exposure To Adverse Selection And/Or Significantly IMPROVE Their Business Results. We'll Examine The Following:

- Strategies To Minimize The Negative Impact On Profitability And The Pricing Problems Generated By The Provisions Within The Health Care Reform Law That Are ALREADY IN EFFECT.
- Strategies That Can Be Implemented ASAP To Reduce Adverse Selection And/Or Improve Business Results That Will Not Be Impacted No Matter What Happens To The Health Care Reform Law Over The Next Two Years; Even If It's Repealed!
- Strategies Regarding The Provisions Of The Health Care Reform Law That TAKE EFFECT IN 2014. Insurers Should Be Thinking About These Strategies Now, But Only Implement Them When It Appears Fairly Certain That The Health Care Reform Law Will Proceed As Envisioned.

**LAS VEGAS, NV
MARCH 15-16, 2012**

introduction

Because of all the confusion and uncertainty regarding the Health Care Reform law, most insurers are somewhat at a loss regarding what they should be doing RIGHT NOW as far as their everyday activities are concerned as well as how they should be preparing for Health Care Reform. This confusion also applies to consultants, brokers, employers, medical providers, and all other stakeholders. Some of the most common questions that insurers are asking are as follows:

- When will the government provide ALL the DETAILED information we need to effectively prepare for Health Care Reform? How many thousands of additional pages of material will the government generate to accomplish this?
- How will state regulators respond to the Health Care Reform law, especially in regards to the provisions that deal with underwriting and pricing? How will our state define “small groups” through 12/31/2015? How will the exchanges operate?
- When and how will the Supreme Court rule regarding the constitutionality of the “individual mandate” and the Health Care Reform law itself?
- How will the Health Care Reform law be impacted if Obama isn’t re-elected? If it’s repealed, what will the next version of health care reform look like?

Insurers who are taking a “wait and see” attitude will find themselves in a dangerous position down the road since there are so many time-consuming strategies that need to be developed to minimize their exposure to adverse selection and to achieve acceptable business results. On the other hand, insurers who are presently spending an enormous amount of time developing strategies to best protect themselves under Health Care Reform (and making a lot of assumptions along the way with respect to the provisions that take effect in 2014) may end up wasting a great deal of time, effort, and money if Health Care Reform doesn’t evolve as they thought it would.

Approximately 85% of the time expended during this seminar is spent examining HIGHLY EFFECTIVE STRATEGIES AND TECHNIQUES that insurers can use to protect themselves RIGHT NOW. The remaining 15% of this seminar is devoted to STRATEGIES REGARDING 2014 that insurers should start seriously thinking about but only implement once it’s fairly certain that the Health Care Reform law will proceed as it’s envisioned.

the MLR requirement

When it comes to incurring administrative expenses these days, insurers are quite concerned about the MINIMUM LOSS RATIO requirement, and rightfully so. However, insurers should be FAR MORE CONCERNED about the MAXIMUM LOSS RATIO that they could experience each year. If an insurer has a loss ratio on

“small group” business that’s under 80%, they’ll have to pay premium rebates but they’ll still achieve profitability. If an insurer has a 90% loss ratio on “small group” business, they won’t have to pay any premium rebates but they’ll almost certainly incur a SUBSTANTIAL FINANCIAL LOSS. Obviously, paying premium rebates is preferable. Incurring a reasonable amount of administrative expenses makes a great deal of business sense IF the expenditure results in improved business results. This is the case with respect to OUR SEMINARS!

about our company

S. M. Snow & Associates, Inc. has been providing the most comprehensive and worthwhile training seminars available in the industry for the past seventeen years. We conduct training seminars throughout the country on a regular basis and we also conduct in-house training programs for HMOs, Blue Cross Blue Shield plans, and commercial insurance companies. To date, we’ve conducted over 185 seminars and approximately 100 in-house training programs and have trained nearly eleven thousand insurance professionals.

who should attend

This seminar is an intermediate/advanced level program that’s primarily intended for group health underwriters, actuaries, and consultants.

your instructor

Scott M. Snow FSA, MAAA is the sole presenter throughout this program. He is a Fellow of the Society of Actuaries, a Member of the American Academy of Actuaries, and the President of S. M. Snow & Associates, Inc. He has thirty six years of experience working with HMOs, Blue Cross Blue Shield Plans, and Commercial Insurance Companies. Mr. Snow is an industry expert regarding group health insurance. He’s lectured extensively on underwriting, pricing, profitability, benefit design, and many other aspects of group health insurance during the past seventeen years.



Mr. Snow is an extremely effective communicator and presents complicated subject matter in a clear, concise, and down-to-earth manner.

continuing professional development credits for actuaries

This innovative seminar qualifies for 12 units of continuing professional development (CPD) credit.

bulletproof strategies in uncertain times

Comprehensive Training Manual Included!



our seminars are in a class by themselves

Unfortunately, the vast majority of the seminars and conferences that are conducted in our industry each year can best be described as “social gatherings” in contrast to “meaningful learning experiences”. We’ve all attended many of these events over the years. We’ve listened to keynote addresses by politicians and/or celebrities who know nothing about group health insurance, we walked through the exhibitor’s hall where everyone was selling their products and services, we’ve enjoyed bumping into old friends who were also in attendance, and we’ve had great dinners at an excellent restaurant or two; however, we’ve learned **LITTLE OR NOTHING** that would improve our company’s business results!

The main reasons for this are two-fold:

- The presenters at these events are unpaid volunteers who aren’t going to devote a great deal of their time and energy preparing their presentations.
- The presenters are usually consultants who only provide “teaser information” since they’re trying to attract new clients, or the presenters are your competitors who also are not going to provide you with any useful information for obvious reasons.

From an educational perspective, these events are quite frankly a **WASTE OF YOUR TIME AND YOUR COMPANY’S MONEY!** These days, insurers shouldn’t be sending anyone to any seminar or conference unless it provides **COMPREHENSIVE INFORMATION** to attendees that will translate into **IMPROVED BUSINESS RESULTS**. The seminars conducted by S. M. Snow & Associates are the **MOST COMPREHENSIVE AND WORTHWHILE** seminars available in the industry **BY FAR**. We invest over 1,000 hours of time developing and refining each of our seminars. We provide you with the formulas, rating factors, and highly effective strategies you need! The benefits of attending our seminars **FAR EXCEED** the cost involved.

our website

For additional information regarding all of our seminars, our in-house training programs, our company, the instructor, and our seminar schedule, visit our web site at **www.smsnow.com**. You can also register online.

our in-house training programs

We also conduct the most comprehensive and worthwhile **IN-HOUSE** training programs available in the industry. We can conduct any of our seminars on an in-house basis or we can customize a program to meet your staff’s specific training needs. In-house training programs are cost effective for groups of 10 people or more. Call us at (508) 393-2663 or visit our web site at **www.smsnow.com** for more information.

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day one

8:00 Registration ~ Continental Breakfast

8:30 OPENING REMARKS

8:35 PROGRAM OVERVIEW

8:55 AN EXAMINATION OF THE MINIMUM LOSS RATIO (MLR) REQUIREMENT AND WHAT INSURERS CAN DO TO MINIMIZE ITS NEGATIVE IMPACT ON PROFITABILITY

- The Minimum Loss Ratio For “Individual Health”, “Small Groups”, And For “Large Groups”
- How The Insurer’s MLR Must Be Calculated For Each Of The Three Business Segments
 - ◆ Submitting Data To The Secretary Of HHS By June 1, 2012
 - ◆ How The Insurer’s MLR Is Determined
 - The Timing Involved
 - The Types Of Expenses That Insurers Can Use To Increase Their MLR
 - The “Credibility Adjustment” That Will Also Help Some Insurers
 - The “Base Credibility Factors” And “Plan Deductible Factors”
- How Potential Rebates Are Determined
 - ◆ When Rebates Must Be Distributed, How, And Whose Responsible For The Proper Distribution Of Rebates
- We’ll Discuss The Types Of Expenses That Help An Insurer Increase Their MLR And The Types That Don’t
- Minimizing The Financial Pain Of The MLR Requirement
 - ◆ How To Properly Conduct An Administrative Expense Study
 - ◆ **SENSIBLY** Reducing Administrative Expenses
 - How To Reduce The Exceptionally High Administrative Expenses Associated With “Tiny” Groups
 - ◆ Identifying Those Expenses That **DIRECTLY** Improve The Quality Of Care Which An Insurer Can Use To Increase Their MLR
 - Internal Organizational Changes That Insurers May Need To Make In Order To Maximize The Amount By Which They Can Increase Their MLR
 - ◆ We’ll Also Show You Many Types Of Expenses That **INDIRECTLY** Improve The Quality Of Care Which An Insurer Can Also Use To Increase Their MLR

10:05 Refreshment Break

10:25 PRICING GROUPS PROPERLY IN LIGHT OF THE PRICING-RELATED PROVISIONS WITHIN THE HEALTH CARE REFORM LAW THAT ARE ALREADY IN EFFECT

- Examining The Impact Of A Group’s “Grandfathered Status”
 - ◆ The Pros And Cons Of A Health Plan Being Grandfathered
 - ◆ How A Health Plan Loses Its Grandfathered Status
 - ◆ Why The Required Premiums For A Specific Group Vary **SUBSTANTIALLY** Depending On The Group’s Grandfathered Status And Many Other Variables That Are Unique To Each Group
- Estimating The Additional Premium Needed To Cover “Children” To Age 26
 - ◆ We’ll Examine This Provision In Depth
 - ◆ **FOUR CASE STUDIES** Will Illustrate Why A Group’s Premium For “Family Coverage” Can Increase By 1% To As Much As 8% Depending On A **HANDFUL** Of Variables That Are Unique To Each Employer Group. (This 1% To 8% Range Assumes That Coverage Is Extended From Age 23 To 26)
 - ◆ The Difference In Cost Between A Grandfathered Health Plan And A Non-Grandfathered Health Plan For Each Of The Four Case Studies

day one, continued

- Estimating The Additional Premium Needed To Cover “Free” Preventative Health Care Services
 - ◆ The Long List Of Preventative Health Care Services
- Properly Addressing The Many Additional Pricing Complications Regarding “Experience Rated” Groups That Health Care Reform Has Generated
- HHS’s “10% Rule” Regarding Rate Increases
 - ◆ How A State Will Most Likely Administer This Rule
 - ◆ What Insurers Need To Do Starting NOW To Improve Their Chances Of Getting Approval For Rate Increases That Are In Excess Of 10%
- The \$2 Per Person Per Year “Health Care Reform” Tax On EVERY Group (Effective Date 1/1/2012)

12:00 Lunch (Provided For Attendees)

1:00 STRATEGIES REGARDING THE PROVISIONS WITHIN THE HEALTH CARE REFORM LAW THAT TAKE EFFECT IN 2014

This Is The Only Module In This Seminar That Examines Strategies Regarding 2014. Given All The Confusion And Uncertainty That Exists Right Now With Respect To The Future Of The Health Care Reform Law, We’ll Spend A Minimal (But Adequate) Amount Of Time On This Topic.

- An Overview Of The Underwriting Prohibitions And The Pricing Prohibitions And Restrictions That Take Effect On 1/1/2014 Regarding “Small Groups”
- How Many States Will Opt To Maintain Their Current Definition Of “Small Groups” Through 12/31/2015?
- The Approximate Premium Increase Needed Due To The Virtual Elimination Of The Underwriting Function, The Pricing Prohibitions And Restrictions, And The “Health Care Reform” Taxes And Fees That Take Effect In 2014
- The Required Premium Increases Versus HHS’s “10% Rule”
- We’ll Provide A Detailed Overview Of Many Strategies (Shown Below) That Insurers Should Start Thinking About And Implement Once It’s Fairly Certain That The Health Care Reform Law Will Proceed As Envisioned
 - ◆ Data Collection Needs
 - ◆ How To Be Revenue-Neutral Regarding The 3:1 Restriction On Age Rating
 - ◆ Rating “Small Groups” Based On Their Tobacco Usage
 - The Government’s Incomprehensible Description Regarding How Insurers Should Rate Based On Tobacco Usage. We’ll Show You A Creative Approach That Appears To Be Legal.
 - ◆ How To “Clean Up” Your “Small Group” Block Of Business When Renewing Groups For Their 2013 Plan Year
 - The “Upside-Down” World Of Pricing In 2014+ And The Immense Adverse Selection That It Will Generate!
 - ◆ Protecting Your Company From Employers Who “Game” The Health Care Reform Law (Either Sensibly, Creatively, Or Deceptively) To Minimize Their Health Plan Costs At The Insurer’s Expense
 - ◆ How To Capitalize On The Exploding Growth In The Number Of Self Funded Groups That’s Coming In 2014

2:30 Refreshment Break

2:50 HOW AN INSURER CAN MAKE SUBSTANTIAL REFINEMENTS TO THEIR GEOGRAPHIC AREA RATING FACTORS (GARFs) AND THE TECHNIQUE THEY USE TO ASSIGN A GARF TO A SPECIFIC GROUP

- How Geographic Area Rating Will Be More Tightly Regulated Starting In 2014
 - ◆ We’ll Examine What Massachusetts Did Here
- Why Geographic Area Rating Has Been So Imprecise Historically

- ◆ We’ll Illustrate This Using A Detailed Case Study
- How Insurers Can Dramatically Refine Their Area Factors And The Technique They Use To Assign A Geographic Area Rating Factor To A Specific Group
 - ◆ Three Highly Effective Approaches Will Be Examined

3:30 HOW AN INSURER CAN MAKE DRAMATIC IMPROVEMENTS TO THEIR MINIMUM PARTICIPATION REQUIREMENT (MPR) AND THEIR MINIMUM EMPLOYER CONTRIBUTION REQUIREMENT (MECR)

- How These Improvements Will Reduce Your Administrative Expenses, Adverse Selection, And Employer Fraud!
 - Improving The Minimum Participation Requirement (MPR)
 - ◆ **Case Study #1:** This Insurer Requires A 75%+ MPR For Groups With 2-9 “Net Eligible” Employees
 - We’ll Examine This Insurer’s Profitability And Enrollment By Participation Level To Determine If This MPR Needs To Be Increased For 2-9
 - ◆ **Case Study #2:** This Insurer Varies Its MPR By “Small Group” Size (i.e., 2-9, 10-24, And 25-50 Net Eligibles)
 - A Non-Traditional Minimum Employer Contribution Requirement (MECR) Strategy That This Particular Insurer Should Be Using
 - An Example That Clearly Demonstrates Why The MPR Must Make Sense In Light Of The MECR For Each Group Size
 - ◆ Techniques And Data Sources To Help You Detect Fraud
 - Improving The Minimum Employer Contribution Requirement (MECR)
 - ◆ Special Approaches That Some Insurers Use Regarding Those Employers Who Contribute Nothing Towards Dependents
 - ◆ **Case Study #1:** We’ll Examine Two Insurers With Significantly Different MECR Strategies. We’ll Show You Why An Insurer That Uses Our Sophisticated MECR Strategy Has Five HUGE Advantages Over Another Insurer That Uses A Traditional MECR Strategy.
 - ◆ **Case Study #2:** This Insurer Has A Traditional 50% MECR For Large Groups (i.e., Currently 51+ Employees). Should This Insurer’s MECR And/Or MPR Be Modified For Groups With 51-99 Employees?
 - We’ll Analyze The Participation Rates And Incurred Loss Ratios By Employer Contribution Level To Determine What This Insurer Should Consider Doing
 - ◆ Techniques And Data Sources To Help You Detect Fraud
- [NOTE: The MPR & MECR Will Not Be Prohibited Until 2014 Under Health Care Reform.]

4:30 End Of Day One

day two

8:00 Continental Breakfast

8:30 WHY AN INSURER SHOULD SERIOUSLY CONSIDER DEVELOPING A NON-TRADITIONAL COMMUNITY RATING BY CLASS (CRC) PRICING METHODOLOGY TO MORE APPROPRIATELY PRICE “LARGE GROUPS”

*Remember, CRC Is Used To Price All “Fully Insured” Groups As Well As The Non-Credible Portion Of Renewal Premiums For Every “Experience Rated” Group That’s Not Fully Credible. Why Use The Traditional 50+ Year Old CRC Approach That Works Extremely Poorly When You Can Price Groups In A Substantially More Appropriate Manner? **NOTE:** You Can Also Use A Non-Traditional CRC Pricing Approach For “Small Groups” In Most States From Now Through 12/31/2013 (And Even Beyond This Date If The Health Care Reform Law Is Repealed). As Far As “Large Groups” Are Concerned, A Non-Traditional CRC Approach Can Be Used Starting Now.*

day two, continued

- We'll Examine A Dozen "Dynamics" That Impact A Group's Claims Level (Like The Participation Rate For Example). Why Don't We Have A Dozen Different Types Of Rating Factors?
- A "Report Card" That Demonstrates How Inaccurate And Inappropriate The 50+ Year Old TRADITIONAL CRC Pricing Methodology Is
- We'll Describe Our Superior Non-Traditional CRC Pricing Methodology Which Relies On Some Traditional Rating Factors Plus A Handful Of Non-Traditional Rating Factors That Reflect The Claims Impact Resulting From "Dynamics" That Aren't Even Considered In The Traditional CRC Pricing Approach!
- An In Depth Examination Regarding Why Industry Rating Factors (IRFs) Are So EXTREMELY Imprecise (Which Is Why They're Not Used In Our Non-Traditional CRC Pricing Methodology)
 - ◆ A Comprehensive Examination Of The Three Main Problems Regarding The Way IRFs Are Developed That Causes IRFs To Be EXTREMELY Imprecise To Say The Least!
 - ◆ Why IRFs Wouldn't Work Even If They Could Be Soundly Developed. We'll Rely On A Comprehensive Case Study To Prove It To You.

9:20 DEVELOPING A NON-TRADITIONAL CRC PRICING METHODOLOGY TO MORE APPROPRIATELY PRICE "LARGE GROUPS" (Part 1)

- The Types Of Data That Insurers Should Be Collecting If They Want To Dramatically Increase Their Pricing Sophistication
- The Claims Data Used To Develop Rating Factors In Regards To A Specific Dynamic Can Be Significantly Or Substantially "Contaminated" Due To The Interaction Of Over A Dozen Other Dynamics That Are Impacting Claims Simultaneously.
 - ◆ Why The Degree Of Contamination Varies Greatly Depending On The Type Of Rating Factor Being Developed
 - ◆ We'll Show You A Creative Approach That You Can Use To Minimize This Claims Contamination.
- A Detailed Examination Regarding How Participation Rating Factors Should Be Developed (A Template For Developing All Non-Traditional Rating Factors)
 - ◆ Judiciously Selecting The Data You'll Use To Minimize The Distortion Caused By Those Dynamics Other Than Participation
 - ◆ We'll Examine Incurred Loss Ratios (ILRs) By Participation Rate For Various Group Sizes, Make Appropriate Adjustments, Then Develop The Participation Rating Factors

10:00 Refreshment Break

10:20 DEVELOPING A NON-TRADITIONAL CRC PRICING METHODOLOGY TO MORE APPROPRIATELY PRICE "LARGE GROUPS" (Part 2)

- Developing "Employee Type" Rating Factors
 - ◆ Judiciously Selecting The Claims Data We'll Use Here
 - ◆ Developing The Five "Employee Type" Rating Factors Will Involve Claims Adjustments For Age, Sex, Product, And The Group's Participation Rate.
 - We'll Use A Case Study To Show You How To Make These Adjustments To Strip Out The Impact Caused By The Above Mentioned Dynamics.
- Developing "Annual Employee Turnover" Rating Factors (Optional)
- Estimating Industry ADJUSTMENT Factors For A Handful Of Industries (Optional)
- A Detailed Case Study That Illustrates How This Non-Traditional Approach To CRC Rating Is Used To Develop Premium Rates For A Specific Group

11:10 EFFECTIVELY MONITORING THE CHARACTERISTICS OF THE NEW BUSINESS THAT YOUR COMPANY IS WRITING TO IDENTIFY PROBLEMS AND OPPORTUNITIES AS THEY UNFOLD

- Paying Particular Attention To Any Increase In The Number Of "Undesirable Groups":
 - ◆ Groups In Bad Industries, Heavily Female Groups, And "Tiny" Groups To Name A Few
- We'll Use A Detailed Case Study To Illustrate A Four Step Method To Comprehensively Analyze Your Business Results As They Emerge. We'll Also Show You The Wide Range Of Problems/Opportunities That This Comprehensive Analysis Can Potentially Reveal.
 - ◆ **STEP 1:** Gathering Useful Competitor Intelligence
 - We'll Describe A Comprehensive Competitor Intelligence System That Works Extremely Well
 - ◆ **STEP 2:** Analyzing Your New Business In Depth To Uncover Problems And Opportunities As They Emerge. There Are Three Levels Of Analysis Involved That Do Not Involve An Excessive Amount Of Your Time.
 - ◆ **STEP 3:** Fully Understanding What Your Business Results Are Telling You
 - ◆ **STEP 4:** Devising And Implementing Action Plans To QUICKLY Improve Future Business Results
- How To Examine Your New Business To Determine If Your Underwriting And Pricing Functions Are Doing The Job For Which They Were Intended
- How To Perform A Penetration Study To See How The Distribution Of Your In-Force Block Of Business By SIC Code And Group Size Compares To The Potential Universe Of Customers (We'll Rely On A Valuable State-Specific Data Source That You Can Download For Free).

12:20 Wrap Up / Q&A

12:30 Adjournment

If you'd like to attend a seminar and actually learn a great deal of valuable information, our seminars are for you!



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registration details

The registration fee for this outstanding training seminar includes the two day training program, continental breakfasts, all refreshment breaks, lunch on day one, as well as the invaluable training manual.

	# of attendees from the same company			
	1	2	3	4+
"Per Person" registration fees	\$1,395	\$1,295	\$1,195	\$1,095
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ON-LINE: Our web site address is www.smsnow.com

BY PHONE: Our phone number is (508) 393-2663

We will email or fax you a confirmation/invoice by the end of the day.

Your check should be made out to "S. M. Snow & Associates, Inc.". We'd like to receive your check no later than three full weeks prior to the program.

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We accept American Express, MasterCard, Visa, and Discover.

Cancellation Policy: *Only written cancellations received more than two full weeks prior to the program will receive a tuition refund (less a \$195 "per person" processing fee). No refunds or tuition credits will be granted for cancellations made after this time, or for "no shows". No exceptions will be made to this policy regardless of circumstances. Registrant substitutions will be accepted provided that S. M. Snow & Associates is notified prior to the program.*

Attire: "Business Casual" is appropriate.

You'll need a calculator for this seminar. We'll give you one at the seminar that's yours to keep!



the las vegas venue

This outstanding program will be held at the beautiful **Luxor Hotel and Casino** which is located right on the Las Vegas Strip. This hotel has eight restaurants, a health club/spa, a popular nightclub, and of course a casino that's open 24/7. They also offer a wide variety of top-rated shows for those interested.

If you would like to reserve a guest room at the **Luxor, DO SO AS SOON AS POSSIBLE.** The Luxor's phone number for reservations is **(800) 288-1000.** We do NOT have a block of guest rooms set aside at the Luxor for this seminar. In the last few years, room rates for groups that have room blocks at

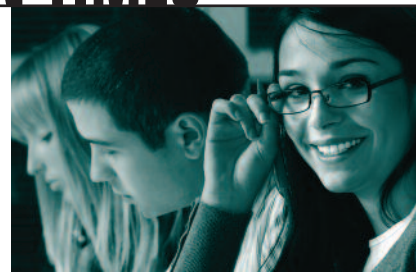
practically any Las Vegas hotel have been substantially higher than the room rates available to the general public (which have been incredibly low). Seminar attendees will pay much less by booking their room at www.luxor.com or by phoning the Luxor.

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registration form

las vegas, nv ■ march 15-16, 2012

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LAS VEGAS, NV MARCH 15-16, 2012

