

**CISR** (Certified Insurance Service Representative)

Each class worth 7 PC hours except Agency Operations = 4 Mgmt., 2 Misc., 1 Eth

ALL COURSES ARE FROM **8:00AM to 4:00pm PST**

Date	Webinar	Speaker
<input type="checkbox"/> 2/12/25	Agency Operations	Kathy Fraley
<input type="checkbox"/> 3/05/25	Commercial Casualty II	Teresa Pacelli
<input type="checkbox"/> 3/12/25	Insuring Personal Residential Property	Casey Johnson
<input type="checkbox"/> 4/16/25	Insuring Commercial Property	Teresa Pacelli
<input type="checkbox"/> 4/23/25	Commercial Casualty I	Teresa Pacelli
<input type="checkbox"/> 5/14/25	Insuring Personal Auto Exposures	Paul Roberts
<input type="checkbox"/> 6/11/25	Elements of Risk Management	Dan Weedin
<input type="checkbox"/> 7/16/25	Insuring Commercial Property	Kathy Fraley
<input type="checkbox"/> 8/13/25	Insuring Personal Residential Property	Ariel Rivera
<input type="checkbox"/> 8/20/25	Other Personal Lines Solutions	Stacy Flynn
<input type="checkbox"/> 9/10/25	Agency Operations	Brandi Anderson
<input type="checkbox"/> 9/11/25	Commercial Casualty II	Eric Weedin
<input type="checkbox"/> 10/15/25	Insuring Personal Auto Exposures	Jessica Stewart
<input type="checkbox"/> 11/05/25	Elements of Risk Management	Kathy Fraley
<input type="checkbox"/> 11/12/25	Commercial Casualty I	Kevin Norton
<input type="checkbox"/> 12/11/25	Agency Operations	Chuck Hembree

**Registration Form**Full Name _____
First Name Middle Initial Last Name

First Name for Badge _____

Designations _____

Agency/Company _____

Co. Address _____

City/State/Zip _____

E-Mail address _____

Telephone () _____

Fax () _____

Date of Birth ____/____/____

License or NPN# _____

Resident License State _____

Is this a new agency/company or address? _____

Is this your first CISR/CIC Course? Yes No Are you updating? Yes No This course will complete designation Yes No **Method of Payment - payment expected prior to attending class**CISR & William T Hold Seminar webinars: \$170 Check enclosed (payable to PIA)Charge to: MC VISA AmEx Discover Business Card or Personal Card Exp. Date _____

Security Code _____

Card No. _____

Card Billing Address _____

City, State, Zip _____

Cardholder Name _____

Cardholder Signature _____

E-mail receipt to _____

Return Information:PIA
3205 NE 78th St., Suite 104
Vancouver, WA 98665Fax: 888-346-4466
Website: www.piawest.com
Call: 888-246-4466 x115**CISR Cancellations received within 10 business days of the course will incur a \$40 non-transferable fee. There will be no refund if participant is a "no-show".**

A CISR course cannot be repeated within two years. If you are updating or retaking the course for exam purposes you may repeat; however, no Credit will be issued.

Don't forget — Three easy ways to register!

- ◆ The Website - www.piawest.com
- ◆ Through the FAX - 360-571-7600
- ◆ Mail in Registration

