



CARIBBEAN ACTUARIAL ASSOCIATION 28th ANNUAL CONFERENCE

Running the Risk

November 28th to 30th 2018 – Jamaica Pegasus Hotel, Kingston, Jamaica

Name: First: _____ Middle: _____ Last: _____

Desired Badge Name: _____ Accompanied by (if applicable): _____

Company: _____ Address: _____ Country: _____

E-mail Address: _____ Contact Nos: (O) _____ (M) _____

AREA(S) OF INTEREST: Life/Health Pensions/Social Security P&C Other _____

I hereby give consent for my contact information on this form to be disclosed to other delegates and sponsors in attendance.
Please note that photographs taken at the conference may be shared publicly on our website and social media.

CONFERENCE FEES: Please tick the relevant box(es) applicable to your registration below.
Payment may be made by Visa, Mastercard or cheque made payable to Caribbean Actuarial Association. All transactions are in US Dollars.
Note that cancellations after 28 October 2018 are subject to a 25% penalty.

Professionalism Workshop (Nov 28): USD \$200 (\$150*)

Two-Day Registration (Nov 29-30 - includes evening events):

<u>ACTUARIAL</u>	CAA Member	CAA Non-Member	<u>NON-ACTUARIAL</u>
Actuarial Fellow	<input type="checkbox"/> USD \$750 (\$650*)	<input type="checkbox"/> USD \$850 (\$750*)	Executive/Certified Professional <input type="checkbox"/> USD \$700 (\$600*)
Actuarial Associate	<input type="checkbox"/> USD \$500 (\$400*)	<input type="checkbox"/> USD \$600 (\$500*)	Government Employee <input type="checkbox"/> USD \$350 (\$300*)
Actuarial Student	<input type="checkbox"/> USD \$300 (\$250*)	<input type="checkbox"/> USD \$350 (\$300*)	General <input type="checkbox"/> USD \$350 (\$300*)

One-Day Registration (excludes evening events): Thursday (Nov 29) Friday (Nov 30) USD \$250 (\$180*)

Evening Events (applicable only to one-day registrants/accompanying guests):

All Evening Events USD \$300 Thursday Gala Dinner (Nov 29) USD \$120
Wednesday Cocktail Reception (Nov 28) USD \$100 Friday Beach Party (Nov 30) USD \$120

***EARLY BIRD RATES APPLICABLE UNTIL 19 OCTOBER 2018**

FLIGHT INFORMATION (if applicable):

	DATE & TIME	PORT	AIRLINE & FLIGHT NO.
Arrival			
Departure			

SHIRT SIZE: Small Medium Large Extra Large

SPECIAL NEEDS (Wheelchair, Dietary, etc.) Please specify, if any: _____

PAYMENT INFORMATION: Credit Card Cheque/Draft Other

If a credit card is being used, please fill in the details below:

Card Number: _____ Name of Cardholder: _____

Expiry Date: _____ Signature: _____

Please return this form to the CAA by either fax or e-mail:

CAA Administrator
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Kingston 5, Jamaica

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Fax: 876-978-1212

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