2019 SOA Annual Meeting & Exhibit

October 27-30, 2019 Metro Toronto Convention Centre Toronto, ON Canada



Meeting Registration

First Name	Last/Family Name	
Title	Company	
Address		
City/State/Province/Country	Zip/Postal Code	
Email		
Phone	Fax	
Emergency Contact Name & Phone		
Preferred Name on Badge		
l require a special lunch: ☐ Kosher ☐ Vegetarian ☐ Fruit Plate	□ Gluten Free □ Lactose Free	Please Note:
Please check here, if, under the American or services to fully participate in this meet	s with Disabilities Act, you require specific aid ing: □ Audio □ Visual □ Mobile	Sept. 27—Deadline for inclusion on attendee list
•	ofessional Development programs, including d and agree that my likeness and voice may	Oct. 7—Deadline for receiving mail-in registrations and cancellation requests (\$100 processing fee applies; optional tickets are not refundable)
appear in a variety of SOA media and form	nats including, but not limited to, osites. I further understand, agree and give	Oct. 25—Deadline for online advance registration
Signature		Date
I give permission for my contact informati	on to be shared with meeting attendees on the	attendee list and in the meeting app. □ Yes □ No
How would you like to hear from our Ever	nt Partners, Sponsors and/or Exhibitors? 🗆 En	nail 🗆 Postal Mail

Registration Rates (No HST applicable to Annual Meeting registration fees).

	Entire Meeting Oct. 27-30		One Day Only Oct. 28 or 29	
	By 9/27	After 9/27	By 9/27	After 9/27
SOA Member Fee	\$1,250	\$1,550	\$800	\$1,100
Canadian SOA Member – 1 st time attendee fee	\$1,000	\$1,300	\$800	\$1,100
Non-Member Fee	\$1,550	\$1,850	\$1,100	\$1,400
SOA Member - Retired/Academic/ Unemployed/Government/Dues Waiver Fee	\$625	\$625	\$375	\$375

2019 SOA Annual Meeting & Exhibit Schedule of Events

Sunday, Oct. 27		1 st Choice	2 nd Choice	Fee
5:15–6:15 p.m.	1, \$25			
7:15–8:45 p.m.	2, \$10/15			
Monday, Oct. 28		1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m.				
8:30–10:00 a.m.	16, Opening General Session			
10:30–11:45 a.m.				
10:30 a.m.–1:30 p.m.	32			
Noon-1:30 p.m.	34 \$20/30, 35 \$25/40, 36 \$55			
1:45-3:00 p.m.				
3:30-4:45 p.m.				
5:00-6:15 p.m.	70, 71			
6:30-7:30 p.m.	Networking Reception (Included in attendee registration fee)			
Tuesday, Oct. 29		1 st Choice	2 nd Choice	Fee
Tuesday, Oct. 29 7:15–8:15 a.m.		1 st Choice	2 nd Choice	Fee
**		1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m.		1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m. 8:30–9:45 a.m.	110, Presidential Luncheon (Included in attendee registration fee)	1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m.	110, Presidential Luncheon (Included in attendee registration fee)	1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m. 11:45 a.m.–1:45 p.m.	110, Presidential Luncheon (Included in attendee registration fee)	1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m. 11:45 a.m.–1:45 p.m. 2:00–3:15 p.m.	110, Presidential Luncheon (Included in attendee registration fee) 144 \$25/50	1 st Choice	2 nd Choice	Fee
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m. 11:45 a.m.–1:45 p.m. 2:00–3:15 p.m. 3:45–5:00 p.m.		1 st Choice	2 nd Choice 2 nd Choice	Fee
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m. 11:45 a.m.–1:45 p.m. 2:00–3:15 p.m. 3:45–5:00 p.m. 6:00–7:30 p.m.				
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m. 11:45 a.m.–1:45 p.m. 2:00–3:15 p.m. 3:45–5:00 p.m. 6:00–7:30 p.m. Wednesday, Oct. 30				
7:15–8:15 a.m. 8:30–9:45 a.m. 10:15–11:30 a.m. 11:45 a.m.–1:45 p.m. 2:00–3:15 p.m. 3:45–5:00 p.m. 6:00–7:30 p.m. Wednesday, Oct. 30 7:15–8:15 a.m.				

PLEASE CIRCLE GUEST OPTIONS AND FEES:

Note: The guest fee for the full meeting or one day only does not include attendance at any sessions.

	Oct. 29 Presidential Luncheon Guest Fee	Full Meeting Guest Fee	Monday Only Guest Fee
Guest Fees	\$100	\$250	\$180

Guest Name

Mail your registration to be received by **Oct. 7**, with check payable to:

Society of Actuaries 2019 Annual Meeting & Exhibit P.O. Box 95600 Chicago, IL 60694-5600

Meeting Fee:	\$
Optional Event Fees	
Guest Fees:	\$
Total Amount Due:	\$