# 2017 SOA Meeting & Exhibit

Oct. 15–18, 2017 Hynes Convention Center Boston, MA



*First Name:				*Last/Family Name:		
Title:	Company Name:					
*Address:						
*City/State/Country: Postal/ZIP Code:						
Phone:	*Email:					
*Emergency Contact Name & Phone	2:					
*Preferred First Name on Badge:						
*Required fields						
☐ Audio ☐ Visual ☐ Mob  I require a special lunch: ☐ Kosh	ile		∃ Fruit Plate	□ Gluten	services to fully participate in this meeting:  n-Free    Lactose Free	
		Entire Meeting One Day Only Oct. 15–18 Oct. 16 or 17			PLEASE NOTE: • Sept. 15 —deadline for inclusion on attendee	
	By Sept.	After Sept. 15	By Sept.	After Sept. 15	list • Sept. 29—deadline for receiving mail-in	
SOA Member Fee	\$1,200	\$1,500	\$780	\$1,080	registrations and cancellation requests (\$100	
Non-Member Fee	\$1,500	\$1,800	\$1,080	\$ 1,380	processing fee applies; optional tickets are not refundable)	
SOA Member - Retired/ Academic/Unemployed/ Government/Dues Waiver Fee	\$600	\$600	\$350	\$350	Oct. 13 – deadline for online advance registration	
likeness and voice may appear in a va	riety of SOA me	edia and forma	ats including, b	out not limited corded during	nd/or video recording. I understand and agree that my I to, photographs, videotapes and the SOA websites. I g this program for educational purposes.	
I give permission for my contact inform	mation to be sl	nared with oth	er meeting att	endees.	□ Yes □ No	
How would you like to hear from our E	Event Partners,	Sponsors and	or Exhibitors	' □ Ema	ail 🗆 Postal Mail	

## 2017 SOA Annual Meeting & Exhibit Schedule of Events

Sunday, Oct. 15		1 <sup>ST</sup> Choice	2 <sup>ND</sup> Choice	Fee
6:30-8:00 p.m.	1 \$25/40			\$

Monday, Oct. 16		1 <sup>ST</sup> Choice	2 <sup>ND</sup> Choice	Fee
7:15 – 8:15 a.m.				\$
8:30 – 10:00 a.m.	18, Opening General Session			
10:30 – 11:45 a.m.				
10:30 a.m1:30 p.m.	34			
Noon – 1:30 p.m.	37 \$25/50, 38 \$25/50			
1:45 – 3:00 p.m.				
3:30 – 4:45 p.m.				
5:00 – 6:15 p.m.	70,71			
7:00 – 8:30 p.m.	SOA Networking Reception Included in attendee registration fee			

Tuesday, Oct. 17		1 <sup>ST</sup> Choice	2 <sup>ND</sup> 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.	108, Presidential Luncheon Included in attendee registration fee			
2:00 – 3:15 p.m.				
3:45 – 5:00 p.m.				
5:15 – 6:15 p.m.	140			
6:00-8:00 p.m.	142 \$30			
6:30-7:30 p.m.	143			

Wednesday, Oct. 18	1 <sup>ST</sup> Choice	2 <sup>ND</sup> Choice	Fee
7:15 – 8:15 a.m.			\$
8:30 – 9:45 a.m.			
10:15 – 11:30 a.m.			
Noon – 1:15 p.m.			

### PLEASE CIRCLE GUEST OPTIONS AND FEES:

#### Note—The guest fee does not include attending sessions.

Presidential Luncheon— Guest	Full	One Day	
Fee	Meeting	Only	
\$60	\$250	\$180	

#### Guest Name

Meeting Fee	\$
Guest Fees	\$
Total Amount Due	\$

Payment in U.S. funds must accompany registration.

Mail your registration to be received by **Sept. 29** with check payable to: Society of Actuaries 2017 SOA Annual Meeting & Exhibit P.O. Box 95600

Chicago, IL 60694-5600