

Consent for the Collection, Use, and Disclosure of Personal Information

As part of my membership in the Insurance Broker’s Association of Alberta, I consent to IBAA’s collection, use, and disclosure of personal information to third parties as required for member benefits and association business purposes.

<p>IBAA commonly collects the following private information:</p> <ul style="list-style-type: none"> • CIPR number • Email address • Date of birth • Home address • Home phone number • Shipping address • Number of brokerage branches and employees • Credit card numbers • IBAA account balances 	<p>IBAA commonly collects this information for the following purposes:</p> <ul style="list-style-type: none"> • enabling IBAA to acquire or renew a member; • assessing membership fees; • course/event registration and CE certificate issuance; • product purchases; • recording, keeping, and disclosing information on course completion, designations, prerequisites, success statistics, etc.; • sharing information with IBAA members, Alberta Insurance Council, Sage Advisor Resources Corp. (a fully owned subsidiary of IBAA), IBAA business booster providers, etc. • assessing IBAA members’ need for other products; • protecting IBAA members against inaccurate Personal Information; • promoting various member benefits and products; • promoting IBAA brokers with consumers; • promoting education courses; • promoting our professional liability insurance; • promoting our convention, conference, and annual meeting.
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IBAA may also be required or permitted to disclose personal information pursuant to relevant privacy laws and other laws.

IBAA’s privacy policy is available on the internet at www.ibaa.ca.

If I wish to review personal information pertaining to my record maintained by IBAA, obtain copies of IBAA privacy policies or standards, or make other inquiries or express concerns, I understand that I may do so by contacting IBAA’s privacy officer. I agree that all personal information that I provide to IBAA will be complete and accurate.

Full Name: _____

Brokerage: _____

Signature: _____ Date: _____

