

CISR - COMMERCIAL CASUALTY I



CISR & CIC are members of The National Alliance for Insurance Education & Research



Date	Venue	Address	Location	Phone	Faculty
7/11/18	The Hotel Bellingham	3985 Bennett Dr	Bellingham, WA 98225	360-676-7700	K Fraley
9/24/18	Portland Airport Sheraton	8235 NE Airport Way	Portland, OR 97220	503-281-2500	T Pacelli
10/16/18	WHA Insurance	2930 Chad Dr	Eugene, OR 97408	541-342-4441	T Pacelli
11/15/18	Sublimity Insurance	100 SW Sublimity Blvd	Sublimity, OR 97382	503-769-6344	T Pacelli

Who Should Attend?



The CISR Program is designed to serve the practical needs of customer service representatives, newly licensed producers, company personnel and any others who wish to refresh their product knowledge.

Agenda

This course is worth 7 CE credits

7:15-7:45 am	Registration (Coffee and rolls)
8:00-9:00 am	Essentials of Legal Liability
9:00 am-12:00 pm	Commercial General Liability
12:00-12:45 pm	Lunch on own
12:45-2:30 pm	Commercial General Liability (Cont'd)
2:30-3:45 pm	Additional Insureds
3:45-4:15 pm	Q&A & Review (Designees and non tests may leave)
4:15-5:15 pm	Examination

This course strengthens your ability to have productive, assured interactions with your commercial customers in the area of commercial casualty exposures and coverages. You will improve your understanding of legal liability and what creates liability exposures. The focus of this course is the Commercial General Liability Coverage Form. This course also addresses additional insured exposures and the coverage available to meet these needs.

*Please Note: Those who completed the Insuring Commercial Casualty Exposures course (which was available prior to Commercial Casualty I and Commercial Casualty II), may choose **either** Commercial Casualty I or Commercial Casualty II as part of their five courses to earn the CISR designation, but not both.*

Please select class you wish to attend (1IC)

7/11/18 BELLI 9/24/18 POR 10/16/18 EUG 11/15/18 SUB

Full Name _____

First Name for Badge _____

Designations _____

Agency/Company _____

Co. Address _____

City/State/Zip _____

E-Mail address _____

Telephone () _____

Fax () _____

Date of Birth ____/____/____

License # _____ License State _____

Is this your first CISR/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: \$155 OR/ID CE Fee \$7

Check enclosed (payable to PIA):

Charge to: MC VISA AmEx Discover

Exp. Date _____ Security Code _____

Card No. _____

Card Billing Address _____

City, State, Zip _____

Cardholder Name _____

Cardholder Signature _____

E-mail receipt to _____