

# IBAO education

## RIBO REGISTRATION POLICY

### REGISTRATION

To register for a course, a completed registration form must be received, with payment in full (to IBAO) prior to the start date. We accept brokerage cheque, brokerage credit card, certified personal cheque, MasterCard, and VISA (see address and fax number, below). Courses are filled on a first come, first served basis.

### DEADLINES

The cut-off for course registration is five (5) business days prior to the start date. Late registrants may be accepted space permitting, however enrollment may be subject to a late registration fee.

### TRANSFERS

Transfers from one program to another, or from one individual to another, are permitted but may be subject to a transfer fee of \$50 depending on the circumstances.

### CANCELLATION

Written notice (emails are accepted) must be received prior to the start date. A full refund is granted when IBAO receives notice more than ten (10) business days prior to the start date; however a \$75 processing fee may apply. No refunds are granted on or after the start date. Penalty for insufficient notice are at the discretion of IBAO.

### TEXTBOOKS

Once textbooks have been received, they're non-refundable.

### FEES

Licensing and RIBO accredited programs are tax exempt. Fees are subject to change without prior notice.

### NSF & BANKING FEES

All bank charges incurred are the applicant's responsibility.

***Note: It's the student's responsibility to become familiar with the Registration Policy prior to enrollment. Please keep a copy of registration information for your records. Mail, fax or email completed registration forms to:***

Rebecca Nguyen, Broker Licensing Education Coordinator, email: [licensing@ibao.on.ca](mailto:licensing@ibao.on.ca) | fax: 416 488 7526  
Insurance Brokers Association of Ontario, 700-1 Eglinton Avenue East, Toronto, ON M4P 3A1

# RIBO REGISTRATION FORM

## 1. Applicant Information

First Name: _____	Last Name: _____
Brokerage (if applicable): _____	
Address: _____	
City: _____	Postal Code: _____
Email: _____	Phone: _____

## 2. Membership Status (complete if you are working for an IBAO member brokerage)

Brokerage: _____	
Principal: _____	Principal Signature: _____

## 3. Select Program

<input type="checkbox"/> Basic Broker Two Week Prep Course	Date: _____
<input type="checkbox"/> Basic Broker Two Day Review Course	Date: _____
<input type="checkbox"/> Basic Broker Weekend Warrior Prep Course	Date: _____
<input type="checkbox"/> Advanced Broker Prep Course (Level II Licence)	Date: _____

## 4. Payment Options (exam fee not included)

Fee Enclosed: \$ _____			
<input type="checkbox"/> Brokerage Cheque	<input type="checkbox"/> Certified Personal Cheque	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA
Card #: _____		Card Expiry: _____	
Cardholder: _____		Signature: _____	

## 5. Applicant Declaration

*I \_\_\_\_\_ confirm the above information is correct. I agree to participate in the above course and abide by IBAO education's Registration Policy.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Mail, fax or email completed registration forms (with payment) to:**

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