Registration Form

Due by Wednesday, February 8th

Fax or Email To: **Legacy Counsellors, P.C.**
and the Wealth Strategies® Institute, LLC
FAX: (413) 529-8027, or call PHONE: (508) 595 8574
EMAIL: tbianchi@legacycounsellors.com

Registrant:

____
Name

____
Company/Title

____
Address

____
Last four #s of Social Security Number (**Required** for CFP CE)

____
CFP Board ID (**Required** for CFP CE)

____
Insurance License Number (**Required** for CT & MA Insurance CE)

____
Phone Number

____
E-Mail Address (All future communication will be via e-mail)

☐ **YES! I wish to attend on February 10th, 2023 at 9:00 AM through Zoom.**

I wish to receive:

2 hrs. Mass. Insurance CE Credit. ☐

2 hrs. Conn. Insurance CE Credit. ☐

2 hrs. Conn. CLE Credit. ☐

2 hrs. Accounting CE Credit. ☐

2 hrs. CFP CE Credit. ☐