



# 2017 NAHU LPRT Carrier and General Agency FEE SCHEDULE

(This form is for carriers and/or general agencies nominating their internal sales force.)

1. Please indicate the number of applications attached. \_\_\_\_\_
2. Please indicate the number of each type of award submitted and amount due.
3. Submit this form with your payment and the LPRT Certification Forms.

## Award Selection

	Number of Candidates	Fee	Total
Soaring Eagle	_____	x \$295	_____
Golden Eagle	_____	x \$145	_____
Eagle	_____	x \$120	_____
Presidents' Council	_____	x \$ 95	_____
Leading Producer	_____	x \$ 70	_____
Total Awards:	_____		Sub Total: _____
<b>Multi Award Discount</b>			
For at least 5 but not more than 9 candidates:		.95 x Sub Total	_____
If the number of candidates total 10 or more:		.90 x Sub Total	_____
Submit check or credit card information for the grand total of:			_____

## Form of Payment Enclosed:

- Check (*Payable to NAHU*)
- Credit Card:

Name as it appears on credit card: \_\_\_\_\_

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Type of Credit Card:  Visa  MC  AMEX  Discover

Signature for Credit Card: \_\_\_\_\_