



• 1011 East Main Street • Suite 400 • Richmond • Virginia • 23219 •  
Phone: (804) 264.0505 • Fax: (804) 264.3260

**Program Schedule for:**

**February 21, 2012**

Holiday Inn Select  
1570 N. Military Highway  
Norfolk, Virginia 23502

**\*\* CLASSES MUST HAVE A MINIMUM OF 6 ATTENDEES PER CLASS. IF CLASSES DO NOT REACH THE MINIMUM ONE WEEK PRIOR TO THE SCHEDULED CLASS DATE, THE CLASS WILL BE CANCELED.\*\***

- |                  |   |
|------------------|---|
| 8:30-9:30 AM     | Working Breakfast, Distractive Driving<br><i>Sponsored by Federated Insurance (1.0)</i>                   |
| 9:45-11:45 AM    | OSHA (2.0)<br><i>Wayne Armstrong, Virginia Department of Labor and Industry</i>                           |
| 11:45 AM-1:00 PM | Lunch on Your Own   |
| 1:00-2:00 PM     | Preneed Rules & Reg's Recap (1.0)<br><i>Richard W. Brockwell, Jr., Capstone PreNeed Funding Solutions</i> |
| 2:00-3:00 PM     | Virginia State Law and Regulations (1.0)<br><i>Virginia Board of Funeral Directors and Embalmers</i>      |
| 3:00-3:15 PM     | Coffee Break  |
| 3:15-4:15 pm     | Group Dynamics and Grief, Alane Cameron Miles (1.0)   |

6 credit hours

**Sponsorship Opportunities Available:  
Lunch Sponsorship  
Coffee Break Sponsorship**

Please contact the VFDA office for additional sponsorship information  
(804) 264-0505.



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Continuing education classes Registration form

**Registration fee: \$125 Members and \$195 non-members**

**\*\* VFDA Members registering 2 or more staff will receive a 10% discount off the total registration Amount\*\***

**\*\* VFDA Non-Members will receive an Affiliate membership for one year\*\***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Which CEU Class will you be attending? Please Check One

- September 15<sup>th</sup>  October 6<sup>th</sup>  November 3<sup>rd</sup>
- November 16<sup>th</sup>  February 21<sup>st</sup>  March 8<sup>th</sup>
- March 22<sup>nd</sup>

Sponsorship:

Yes, I would like to sponsor lunch in the amount of \$\_\_\_\_\_ on \_\_\_\_\_  
CEU Class date

Yes, I would like to sponsor the coffee break in the amount of \$\_\_\_\_\_ on \_\_\_\_\_  
CEU Class date

Payment:  Check  Visa  MC  American Express  Discover

Name on the card: \_\_\_\_\_

Card number: \_\_\_\_\_ Exp Date \_\_\_\_\_

Signature: \_\_\_\_\_

**VFDA members and non-members please mail or fax your registration today!**

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**info@vfda.net**  
**www.vfda.net**