

As a member, you may be listed in the “Choose an Advisor” section in as many categories as you wish. The cost for a listing is only \$25.00 per category per calendar year.

If you have not visited our website ([www.fpaHamptonRoads.com](http://www.fpaHamptonRoads.com)) recently, please do so now to view the many changes that have been made. As a member, you already have an automatic free listing in the Advisor Directory.

The following categories are offered:

Financial Planning  
Estate Planning  
Special Needs Planning  
Life Insurance  
Disability Income Insurance  
Long Term Care Insurance  
Tax Planning and/or Preparation  
College Planning  
Investment Management  
Mortgages  
Banking

Additional categories may be added if sufficient interest is expressed.

If you are interested in being listed in our “CHOOSE AN ADVISOR” section of the [www.fpaHamptonRoads.com](http://www.fpaHamptonRoads.com), please submit your completed registration by December 31, 2007.

“CHOOSE AN ADVISOR” WEBSITE ADVERTISING REGISTRATION FORM

WEBSITE AD INFORMATION:

NAME WITH DESIGNATIONS \_\_\_\_\_  
COMPLIANCE TITLE \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_  
COMPANY ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
COMPANY PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
YOUR WEBSITE ADDRESS \_\_\_\_\_  
\_\_\_\_\_

Listing period expires December 31, 2008. You must remain a member in good standing for your listing to continue to appear on the [www.fpaHamptonRoads.com](http://www.fpaHamptonRoads.com) website. No refunds will be given for terminated listings or for listings removed due to lapsed membership.)

CHECK DESIRED CATEGORIES

_____	@	\$25.00	Financial Planning
_____	@	\$25.00	Estate Planning
_____	@	\$25.00	Special Needs Planning
_____	@	\$25.00	Life Insurance
_____	@	\$25.00	Disability Income Insurance
_____	@	\$25.00	Long-Term Care Insurance
_____	@	\$25.00	Tax Planning and/or Preparation
_____	@	\$25.00	College Planning
_____	@	\$25.00	Investment Management
_____	@	\$25.00	Mortgages
_____	@	\$25.00	Banking

Total Ads \_\_\_\_\_ @ \$25.00/each = \$ \_\_\_\_\_

PAYMENT METHOD:

\_\_\_\_\_ CHECK ENCLOSED IN THE AMOUNT OF \$ \_\_\_\_\_

\_\_\_\_\_ VISA CARD      \_\_\_\_\_ MASTERCARD      \_\_\_\_\_ AMERICAN EXPRESS

CARD NUMBER # \_\_\_\_\_ EXP. DATE \_\_\_\_\_  
AMOUNT AUTHORIZED \$ \_\_\_\_\_

SIGNATURE \_\_\_\_\_

I would be interested in a listing in the following additional categories, if offered. Please contact me if they become available.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEND COMPLETED FORM AND PAYMENT TO:

FPA OF HAMPTON ROADS  
P. O. BOX 6191  
NORFOLK, VA 23508-6191

OR FAX TO EMILY ROUSSOS AT 866-360-6845 TOLL-FREE