

TriArc Advisors, LLC

Roth Conversion Software

Items in red must be filled out.

1. Personal Information-

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

2. Payment to Accompany Form: Check Payable to Rocco DeFrancesco Credit Card Total \$ _____ 3 digit CC ID: _____

3. Credit Card Payment Options: Visa or MC Number: _____ Exp. Date: _____

I would like to order access to the online **Roth Conversion Calculator** software that is being offered through The Wealth Preservation Institute.

_____ I agree to pay a licensing fee to use the software in an amount of **\$500 a year**. **THIS LICENSING FEE IS FOR ONE USER AND NOT FOR AN ENTIRE INSURANCE AGENCY OR MARKETING ORGANIZATION. IF YOU NEED MULTIPLE LICENSES, PLEASE CONTACT TRIAC FOR A DIFFERENT ORDER FORM.**

_____ I work with ECA Marketing and would like access to the Roth IRA Software for **FREE**. I understand that I have a **production requirement** to keep access to the software for free. I agree to place \$250,000 of fixed annuity premium through ECA (www.ecamarketing.com) (\$10,000 of target premium for life insurance sales will suffice). I agree to become licensed with at least one insurance company through ECA within 15 days of signing this agreement.

I understand and agree that if I do not get licensed through ECA with an insurance company within 15 days of this agreement and if I do not place \$250,000 of fixed annuity business with ECA (or \$10,000 of target life premium) within six months of obtaining access to the software, I authorize TriArc Advisors, LLC to charge my credit card \$500. If I choose to pay for the software, I am agreeing to pay the fee and be setup with annual billing. I understand that I will automatically be billed every year unless I send an e-mail to info@thewpi.org indicating that I want to cancel my subscription.

Return completed education registration form and payment to:

Rocco DeFrancesco: info@thewpi.org or 3260 S. Lake Shore Dr., St. Joseph, MI 49085.

Fax: **313-887-0532**. Phone: 269-216-9978.

The address above needs to be the billing address for the credit card.