



205-530 Kenaston Blvd., Winnipeg, MB R3N 1Z4,
PH (204)488-1857 1-800-204-5649 FAX (204)489-0316
Email: info@ibam.mb.ca

FUNDAMENTALS OF INSURANCE APPLICATION FOR EXAMINATION

NAME: _____

EMPLOYER: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

PHONE: _____ FAX: _____

EXAMS ARE AVAILABLE THE 2nd MONDAY OF EACH MONTH, 9:00AM TO 12:00PM, (Please arrive by 8:45am)
APPLICATIONS AND PAYMENTS MUST REACH THE IBAM OFFICE NO LATER THAN ONE WEEK PRIOR
TO EXAM DATE IN WINNIPEG – TWO WEEKS FOR OTHER LOCATIONS.

Payment: Please check one.

_____ 1st Exam - no charge (fee included in registration for previously registered
homestudy students)

_____ Re-write - \$90.00 (GST Included) cash or cheque payable to IBAM

Preferred Date: _____

Location: Please check one.

- _____ WINNIPEG - Centro Caboto Centre, 1055 Wilkes Ave
_____ BRANDON - Manitoba Public Insurance, 731-1st Street
_____ THE PAS - Kelsey School Division, 322 Edwards Avenue
_____ DAUPHIN - Johnston & Company, 18-3rd Avenue
_____ THOMPSON - Provincial Magistrates Court, 59 Elizabeth Drive

Date _____ Signature _____

"Education is the Key"