

Philadelphia Loss Conference

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APPLICATION FOR WEBSITE

Web Address

Members First Name

Last Name

Mailing Address

Street

City

State

Zip Code

Business Address

Street

City

State

Zip Code

Phone Number

E-mail address

Brief Description of business/website

I hereby submit this application to the PHILADELPHIA LOSS CONFERENCE to include my website address on the Philadelphia Loss Conference website Links section. My check of \$30.00 for 1 year made payable to the PHILADELPHIA LOSS CONFERENCE is included with this application. This application is subject to the approval of the officers and members of the Philadelphia Loss Conference and I agree to be bound by their decision.

Signature

Date