

Sales & Informational Seminar Attendance Form

Date: _____ Time: _____ Location: _____

Thank you for attending this Aetna Medicare Sales & Informational Seminar. These seminars allow us to share information with you about the Medicare program, as well as plan options offered by Aetna Medicare. Local agents are available to address your questions and concerns regarding your health care and Medicare prescription drug needs. **Completion of this form is optional.**

Let's Talk. Tell us what's on your mind:

	Last Name	First Name	Please list your specific questions/concerns
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In accordance with Medicare guidelines, the information on this form will not be used to contact you directly. It's used only to track attendance and address your questions and concerns at this seminar. If after this seminar you would like to learn more about Aetna Medicare plan options and have an agent contact you via telephone, you will need to complete a Permission to Contact Lead Card. If you would like to discuss setting up a home visit with an agent, you will need to complete a Scope of Sales Appointment Confirmation Form. Please ask the agent for a copy of these forms.