



Guidance on Competitive and Compliant Loan Originator Compensation

Date: Thursday, February 24, 2011

Place: The Parsippany Hilton Hotel, Parsippany, New Jersey

New rules and legislation regarding loan originator compensation and steering are evolving. As you consider some of your next steps towards compliance, join NYLX and noted experts to understand the implications of these rules to your business, your compensation plans and your bottom line.

SEMINAR COST: \$40.00

Two step registration process:

1. Register using the form to the right to let us know you're coming!
2. Send your registration form plus check or credit card authorization for the \$40.00 registration fee to:

NYLX
Attention: Seminar
100 Valley Road, Suite 201
Mount Arlington, NJ 07856

Or fax to: (866) 311-7047

All payments must be received by **February 18th**

Seminar Details:

Location:
Hilton Parsippany Hotel
One Hilton Court
Parsippany, NJ 07054

Thursday, February 24, 2011

- 8 am Continental Breakfast
- Session Starts 9:00 am
- Session Ends 12:15 pm

Upon payment you will be sent a registration confirmation via email. **PLEASE BRING THIS EMAIL AS YOUR ENTRY TICKET TO THE SEMINAR.**

* All Field Required.

Full Name*

Telephone*

Email*

Title*

Company*

Address*

City*

State/Zip Code*

What technology do you use to price loans?

What LOS do you use?

What is your monthly loan volume?

Disclaimer: By providing us with your email address and /or work phone , you grant NYLX permission to contact you regarding this seminar and other services.

CREDIT CARD AUTHORIZATION - FAX TO 866-311-7047

I, the undersigned, authorize NYLX, Inc. to charge the following credit card my \$40 registration fee to attend the following seminar:

Guidance on Competitive and Compliant Loan Originator Compensation

February 24, 2011

Hilton Hotel, Parsippany New Jersey

Date: _____

Signature: _____

Please fill in the following information about your credit card

Type of Credit Card _____

Credit Card Number _____

Name _____

Address: _____

City: _____

Zip: _____

Expiration Date _____

CVC Number _____

