



United States Department of Labor Employee Benefits Security Administration Savings Fitness Workshop

The Employee Benefits Security Administration wants you to succeed in setting financial and retirement goals. Planning for a secure retirement can be challenging, but the sooner you start, the easier it will be.

Here is one simple way to get you on the road to financial security. Join us as we talk about ways to increase your financial fitness and save for retirement, including making the most of employer-based retirement savings plans.

Our Savings Fitness workshop starts you on the way to setting goals and putting your retirement high on the list of personal priorities. We will have speakers from the Financial Planning Association of Massachusetts and the Social Security Administration.

Who should attend? Anyone who wants to make saving for retirement a priority!

Pre-registration is required and seats are allocated based on a first-come basis. We ask that you make every effort to attend the workshop once you register or send an alternate. Late registrations will be accepted based upon availability. Please act quickly to reserve your spot!

When: October 6, 2011; 11:45 – 1:15 PM EDT
Where: JFK Federal Building, Room 2075 (photo ID required)
15 New Sudbury Street
Boston, Massachusetts 02203-0002

Cost: The workshop and all materials provided are free!

Registration: Fax this form to (617) 565-9666
Or email to phillips.kristy@dol.gov

For More Information: Telephone Kristy Phillips at (617) 565-1396

Individuals with disabilities who need special accommodations please check here.

The attendees list will be available on request. Please check here if you do not want your name shared.

This workshop provides general information on retirement planning, and not legal, accounting, or other professional advice. Because this presentation is only for informational purposes, it should not be interpreted as an endorsement of the participating nonfederal entities, their products or services by the U.S. Department of Labor.

Workshop Registration Form

Registrants Name:

Title:

Company And/Or Association:

Address:

Telephone/Fax Number:

Email Address: