



ADVERTISING/ MARKETING
MATERIALS APPROVAL FORM

Senior Life Insurance Company
Post Office Box 2447
Thomasville, Georgia 31799
877.777.8808

Developer Information

Developer _____ Date _____

Agency Name/ Agent _____

Phone No. _____ Fax No. _____ Email _____

Purpose and Use

Form Number of Proposed Ad: _____

Distribution: ☐ Customers/ General Public ☐ Training
☐ Appointed Agents ☐ Recruiting
☐ Other _____

Jurisdiction(s) in which material may be used (Please check appropriate boxes):

☐ AL ☐ AK ☐ AZ ☐ AR ☐ CA ☐ CO ☐ DE ☐ DC ☐ FL ☐ GA ☐ HI ☐ ID ☐ IL ☐ IN
☐ KS ☐ KY ☐ LA ☐ MD ☐ MA ☐ MI ☐ MN ☐ MS ☐ MO ☐ MT ☐ NE ☐ NV ☐ NJ ☐ NM
☐ NC ☐ ND ☐ OK ☐ OR ☐ PA ☐ RI ☐ SC ☐ TN ☐ TX ☐ UT ☐ VA ☐ WV

If applicable, please indicate the desired date(s) the proposed ad will run: _____

Type of Advertising

Attach a sample of the advertising

☐ Direct Mail/ Fax/ Email Solicitation ☐ Yellow Page Ad ☐ Prospect Letter/ Lead Card
☐ Sales Presentation ☐ Brochure ☐ Point of Sale Illustration
☐ Print Ad/ Column/ Newsletter (Provide name of newspaper, magazine, journal, bulletin, periodical, etc.
and City & State: _____)
☐ Broadcast Media: ☐ Radio ☐ Television (City & State: _____)
☐ Internet/ Website (Submit screen prints of all site pages and link sites)
☐ Training/ Seminar Material ☐ Telemarketing Script ☐ Multimedia
☐ Other: _____

Additional Information

☐ Whole ☐ Term

Comments from Developer about intended use: _____

Market Compliance Review

(This section for Home Office use only)

Comments _____

Approval

Advertising or Marketing Materials are not authorized for final distribution/use without the signature of the Market Compliance Manager. The Market Compliance Manager will retain the original of this Approval Form and a copy of the approved material.

Market Compliance Approval

Signature

Date

