2020 CGA STRATEGIC CONFERENCE

Registration Form

SEPTEMBER 28 - OCTOBER 2, 2020

PLEASE READ INSTRUCTIONS AND CANCELLATION POLICY BEFORE COMPLETING THIS FORM.

1.	. Registrant Information					
	First Name	Last Name				
	TitleCompany			Buil	Building Resilience in Retail	
	Address			_		
	City	State/Prov				
	Zip/Postal Code	_ Country (if other tha	n U.S.)	FAX:	cgastrategicconference.com (916) 448-2793 (credit card only)	
	Telephone					
	E-mail			L MAIL.	jgold@cagrocers.com 1005 12th Street Suite 200	
	Special Assistance (Please Specify)				Sacramento, CA 95814	
2.	Registration Fees					
	All registrations include: Educational Program, and Pre-scheduled meetings for representatives of sponsoring companies. Rate - \$100					
3.	Payment Information					
	Registrations WILL NOT be processed without payment.					
	ENCLOSED IS MY: Check (po	Check (payable to California Grocers Association)			☐ MasterCard ☐ VISA	
	Card No.		Exp. Date		Security Code	
	Cardholder Name (please print)					
	Signature (required for all credit card payments)					
1	Instructions and Rates		Payment			
	Registration form must include payment. Acknowledgment letters confirming registration will be sent via email, fax or mail to each registrant. If changes are needed, note them on the		Payment in U.S. funds by check, VISA, MasterCard, or American Express must accompany this form in order to be processed. Cancellations			
R						
fo						
C			to receive a retund for	a refund for payment of registration, notification must be		

To receive a refund for payment of registration, notification must be received in writing no later than September 21, 2020.

FOR QUESTIONS REGARDING THE CGA STRATEGIC CONFERENCE:

- Call (916) 448-3545 or (800) 794-3545
- E-mail: conference@cagrocers.com
- Website: www.cgastrategicconference.com



than September 21.