

# CA-SIG SPRING FORUM

Thursday, April 30, 2020 | Kimpton Shorebreak Hotel, Huntington Beach  
Register Online at [www.ca-sig.org](http://www.ca-sig.org)

## CONTACT INFORMATION

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Please check here if you have any dietary restrictions or preferences. Someone from our office will call to discuss.

## ADDITIONAL REGISTRANTS

Name \_\_\_\_\_ Email \_\_\_\_\_

Please check here if you have any dietary restrictions or preferences. Someone from our office will call to discuss.

Name \_\_\_\_\_ Email \_\_\_\_\_

Please check here if you have any dietary restrictions or preferences. Someone from our office will call to discuss.

Name \_\_\_\_\_ Email \_\_\_\_\_

Please check here if you have any dietary restrictions or preferences. Someone from our office will call to discuss.

## SPRING FORUM REGISTRATION FEES

\$109 - member - includes broker session, reception and dinner/keynote (\$109 x \_\_\_\_\_) ..... \$ \_\_\_\_\_

\$159 - nonmember - includes broker session, reception and dinner/keynote (\$159 x \_\_\_\_\_) ..... \$ \_\_\_\_\_

\$139 - nonmember - reception, dinner/keynote only (\$139 x \_\_\_\_\_) ..... \$ \_\_\_\_\_

## SPONSORSHIPS To confirm availability, call (855) 735-7403 or register online at [www.ca-sig.org](http://www.ca-sig.org).

Premium Sponsor (\$2,500) ..... \$ \_\_\_\_\_

Dinner Sponsor (\$1,500) ..... \$ \_\_\_\_\_

Reception Sponsor (\$1,250) ..... \$ \_\_\_\_\_

Wine Sponsor (\$1,000) ..... \$ \_\_\_\_\_

Supporting Sponsor (\$600) ..... \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

## PAYMENT INFORMATION

Check# \_\_\_\_\_ (Payable to CA-SIG)      **Credit Card**  AMEX     MasterCard     Visa

Card Number \_\_\_\_\_ Security Code\* \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name of Cardholder \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*The Security Code is a 3 or 4 digit number on the back of your card (front of AMEX card following your card number).

**PLEASE RETURN YOUR COMPLETED FORM AND PAYMENT TO:**  
CALIFORNIA ALLIANCE OF SELF-INSURED GROUPS, INC.  
950 Glenn Drive, Suite 150 • Folsom, CA 95630

