



**Seminar Registration Policy:** Please send the registration form, along with payment to CAHCF no later than July 15, 2026. We cannot process your registration without payment. **Full payment is due PRIOR to the event. Your registration is your commitment to pay, if you do not attend you will be responsible for payment**

Registrants WILL NOT BE ALLOWED TO ENTER the event if FEES ARE UNPAID, personal checks and cash will be accepted at the door.

**Walk-In Registrations WILL NOT BE ACCEPTED.**

**Confirmations:** Confirmation letters will be sent via email to email address on file for the person.

**Cancellations:** Cancellations must be confirmed by email prior to 7/9/26.

**NO REFUNDS will be given after 7/9/26** Substitutions can be made, please call CAHCF to notify them of the change.

**Photography Policy:** By registering for and/or attending a CAHCF/CCAL event, you acknowledge and agree that photographs, video, and other recordings of the event may be taken by CAHCF/CCAL or parties acting on behalf of CAHCF/CCAL, and that these photographs, video, and other recordings may be used by CAHCF/CCAL in any media now known or later invented for any purpose related to CAHCF/CCAL's mission, including educational, promotional, and awareness related uses.

**Fax registration forms to: 860-290-9478 or email to amanning@cahcf.org PLEASE PRINT LEGIBLY!**

Name:\_\_\_\_\_ Position:\_\_\_\_\_ Kosher Meal: \_\_Chicken \_\_Brisket \_\_None  
 Name:\_\_\_\_\_ Position:\_\_\_\_\_ Kosher Meal: \_\_Chicken \_\_Brisket \_\_None  
 Name:\_\_\_\_\_ Position:\_\_\_\_\_ Kosher Meal: \_\_Chicken \_\_Brisket \_\_None  
 Name:\_\_\_\_\_ Position:\_\_\_\_\_ Kosher Meal: \_\_Chicken \_\_Brisket \_\_None

**Facility:**\_\_\_\_\_

Contact Person's Email Address:\_\_\_\_\_

Address:\_\_\_\_\_

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

Phone:\_\_\_\_\_ Fax:\_\_\_\_\_

**If paying by credit card:**



<b>Name on Credit Card:</b> _____	<b>Type of Card:</b> _____
<b>Card Number:</b> _____	<b>Expiration Date:</b> _____ <b>Amount to Charge:\$</b> _____
<b>Security Code: 3 digits for Visa and MasterCard, 4 digits for American express:</b> _____	<b>Billing Address if different:</b> _____ _____

**Register Online:**  
<https://tinyurl.com/97cahcf>