



2021 EMERGING LEADERS PROGRAM

ACECNJ

REGISTRATION FORM

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Send in Your Registration Form Today, Space is Limited!

Registration Deadline: February 19, 2021

Participation is limited to 30.

- **Cost:** \$3,000 per person for attendees. Tuition includes all meeting materials, PDHs (when applicable), welcome reception, breakfasts, dinners, lunches and lodging for the May 2021 program date. Tuition does not include lodging for March or April or travel expenses. Please note there are room blocks available for March and April. Sessions are scheduled in person and space has been reserved both indoor and outdoor for determination as date approaches.
- Return the completed registration form via fax, email or regular mail as soon as possible to reserve a spot.
- **Payments/Cancellations/Refunds:** Full payment must be received by February 18, 2021 or registration will be cancelled. Cancellations received after February 18, 2021 will receive a 50% refund unless another registrant can be confirmed. Slot may be transferred to another member of the same firm. **No refunds after February 25, 2021.**
- **For Check payments:** Please make checks payable to ACECNJ and mail it with this form to ACECNJ, 310 W State Street, Trenton NJ, 08618.
- If you have questions or would like to add a second individual from your firm you will need to complete another application form, email Jody Herkloz at jody@northstarstrategiesllc.com or Gabrielle Liguori at gabrielle@northstarstrategiesllc.com
- This program is only open to ACECNJ member firms.
- Registration form must have signature of primary contact for member firm with ACECNJ.
- Attendees must be present at all sessions. If more than half of one session is missed, that session must be attended the following year to graduate. Only the attendee registered may attend the sessions. Substitute attendees will not be accepted. There will be PDH forms available at the end of the program.

ACECNJ

310 W State Street
Trenton, NJ 08618

Name of Emerging Leader: _____

Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Fax: _____

Email: _____

Signature of Primary Contact for Firm with ACECNJ:
