



September 21-22, 2023

Vespera Resort on Pismo Beach

Join fellow CACM high rise managers from across California for this two-day summit focused specifically on you! Experience the freedom of collaborating with other attendees who view communities through the same lens. You'll find collaborative and collective solutions to some of your most challenging problems, all while building and strengthening relationships.

TERMS: Signed registration form must be accompanied by check or credit card information. Confirmation will be sent upon receipt of paid registration. I acknowledge and accept all terms and policies on the form.

STATEMENT OF PHOTO & VIDEO RELEASE: Photography and video recording will be taking place during the event as part of CACM's ongoing marketing, public relations and social media efforts. By registering for this event, you grant CACM the right to film and photograph you without compensation and release CACM from all liability in connection with the use and distribution of your likeness. If you do not wish CACM to use your name, image or likeness, please contact communications@cacm.org.



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marketing@cacm.org

CONTACT NAME/ TITLE

COMPANY

ADDRESS

CITY / STATE / ZIP

WEBSITE

EMAIL

PHONE MOBILE

HIGH RISE SUMMIT REGISTRATION FEES

| | Early (Thru 8/18) | Regular |
|--|-------------------|---------|
| <input type="checkbox"/> CACM Manager Member | \$399 | \$499 |
| <input type="checkbox"/> Non-Member | \$599 | \$699 |

Dietary Restrictions:

Program Details

Attendance is limited to paid registrants and sponsors. Full conference registration fee includes all High Rise Summit program materials and meals as indicated. CCAMs, CAFMs and MCAMs earn 6 CEUs. CAMEX earn 5 points. Dress Code: Business/Professional Casual

Registration/Refund Policy

Payment is due at the time of registration. Confirmation will be sent upon receipt of paid registration. Requests for cancellation must be received in writing. The event is 90% refundable two weeks prior to event. The event fee is 50% refundable if the cancellation request is received less than 2 weeks but more than a week before the event. The event is non-refundable after Sept. 13. Please contact registration@cacm.org or 949-916-2226 with any questions.

PAYMENT METHOD Full payment must accompany this form.

Please remit form via email to: registration@cacm.org or mail to:

CACM, Attn: Registration, 23461 South Pointe Dr., Ste. 200, Laguna Hills, CA 92653

Visa Mastercard American Express Discover

CARD NUMBER

EXP. DATE CVV CODE

CARDHOLDER'S NAME

AUTHORIZED SIGNATURE

YES, please email credit card receipt to _____

AUTHORIZED SIGNATURE

DATE