

CALCIMA
Spring Thaw 2024
Feb. 7 Ontario Feb. 21 Sacramento

SIGN UP TODAY!

SPRING THAW SAFETY CONFERENCES

The Spring Thaw offers the opportunity to hear the latest from federal and state agencies, industry members, and safety and legal experts on workplace safety and health. Be sure to sign up today!



FEBRUARY 7, 2024
7:30 A.M. - 3:30 P.M.



DOUBLETREE BY HILTON ONTARIO AIRPORT
222 N VINEYARD AVE
ONTARIO, CA 91764



FEBRUARY 21, 2024
7:30 A.M. - 3:30 P.M.



HILTON SACRAMENTO ARDEN WEST
2200 HARVARD STREET
SACRAMENTO, CA 95815

WWW.CALCIMA.ORG/EVENTS-THAW
FOR MORE INFORMATION, CONTACT ABI HAGUE
AHAGUE@CALCIMA.ORG | (916) 554-1000 EXT. 105



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Spring Thaw 2024
 Feb. 7 Ontario Feb. 21 Sacramento

VENDOR REGISTRATION

SPRING THAW SAFETY CONFERENCES

Vendor Registrations include 1 registration, a 6' table and an electronic roster of attendees.

Attendees will be given two breaks in which we encourage them to visit each vendor table.

Booths are \$500 per location or a discounted rate of \$900 if you register for both Ontario and Sacramento (additional fee for non-members).

Governmental agencies may qualify for a complimentary booth, please contact CalcIMA to inquire.



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Spring Thaw Safety Conference & Vendor Registration

Name: _____ Title: _____

Company: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Location	Quantity	Member/Govt	Non-Member	Total
<input type="checkbox"/> Ontario (February 7)		\$125	\$200	
<input type="checkbox"/> Ontario (5 Attendee Discount)		\$600	\$975	
<input type="checkbox"/> Ontario Vendor		\$500	\$600	
<input type="checkbox"/> Sacramento (February 21)		\$125	\$200	
<input type="checkbox"/> Sacramento (5 Attendee Discount)		\$600	\$975	
<input type="checkbox"/> Sacramento Vendor		\$500	\$600	
<input type="checkbox"/> Vendor Both Locations		\$900	\$1000	

Each attendee will receive a confirmation email with full details including locations, times and agenda.

Attendee #1 _____ Email: _____

Attendee #2 _____ Email: _____

Attendee #3 _____ Email: _____

Attendee #4 _____ Email: _____

Attendee #5 _____ Email: _____

Please use a separate sheet for additional attendees

Payment Type

Amount Due: \$ _____

☐ Check

☐ Credit Card

Card # (Visa/MasterCard/American Express) _____

Exp. Date _____

Card Billing Address _____

CVV Number _____

Card City/State/Zip _____

Cancellation Policy: Because the Association must be protected from financial losses, you will be charged for expenses of the event unless written notice of cancellation is received in the CalCIMA office 3 business days prior to the event (February 2 for Ontario and February 16 for Sacramento). Sending replacement personnel is recommended.

Send via FAX to:

(916) 554-1042

Mail with payment to:

CalCIMA
455 Capitol Mall, Suite 210
Sacramento, CA 95814

Email:

Abi Hague
ahague@calcima.org
(916) 554-1000 ext. 5

www.calcima.org/events.thaw