

NATIONAL ASSOCIATION OF POLICE ORGANIZATIONS

30TH ANNUAL PENSION & BENEFITS SEMINAR

Please join the National Association of Police Organizations at our 30th Annual Police, Fire, EMS and Municipal Employee Pension & Benefits Seminar January 28-30, 2018 at Caesar's Palace

Thanks to the assistance of our impressive advisory board, we are receiving overwhelming responses to our seminar. Our goal is to educate pension and union representatives, along with their providers, on the latest issues surrounding the pensions and benefits industry.

This year's key issues include: Economic and Political Updates, Asset Allocations, Alternative Investments, Department of Labor's New Fiduciary Rules and Rising Health Care Costs, just to name a few.

The seminar will bring together leaders from first responder associations, as well as pension trustees and administrators from across the country. The exhibit area offers an excellent opportunity to meet and interact with the delegates. Enhance your marketing efforts by sponsoring a special event.

For sponsorship opportunities, contact NAPO's Director of Events, Elizabeth Loranger, at (800) 322-6276 or eloranger@napo.org



January 28-30, 2018
CAESAR'S PALACE HOTEL & CASINO
Las Vegas, Nevada

ATTENDEE REGISTRATION FORM

Registrant Information

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email: _____

Attendees

Name: _____

Title: _____

Name: _____

Title: _____

Name: _____

Title: _____

Name: _____

Title: _____

Please provide the full name for each attendee, as it should appear on their name badge.

Registration Fees

NAPO Member \$595 _____

Pension/Union Trustee \$595 _____

Administrator/Director/Officer \$595 _____

Asset Manager/Service Provider \$2,895 _____

Member Spouse \$150 _____

TOTAL PAID \$ _____

Payment Information

Check Enclosed \$ _____ (payable to NAPO)

Charge \$ _____ ☐ MC ☐ VISA ☐ AMEX ☐ DIS

Card #: _____

Exp. Date: _____ CVV#: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Name on Card: _____

Signature: _____