



COMMUNITY ACADEMIC INSTITUTE 2016 LECTURE SERIES

COMMUNITY SECURITY – WHAT YOU DON'T AND SHOULD KNOW

TUESDAY, JULY 19, 2016
CAI-NJ HEADQUARTERS, 500 HARDING RD.,
FREEHOLD, NJ 07728

FREE EVENT FOR ALL CHAPTER MEMBERS

PROGRAM HIGHLIGHTS

- What security means to me and my association?
- How to identify and evaluate your association's security needs
- The importance of a security plan
- Understanding how security equipment works
- Should you use phony security cameras?
- The truth about gate systems
- Tricks of the trade – how to choose a security contractor
- What's new in security equipment and services that can increase security and decrease your costs?

Date: Tuesday, July 19, 2016
Location: CAI-NJ Headquarters, 500 Harding Rd. Freehold, NJ 07728
Agenda: 9:30 am-10:00 am: Registration & Breakfast
 10:00 am-11:30 am: Program
Speaker: Kevin Oliver - G&C Electronics

Space is limited. Attendees are strongly encouraged to register by Friday, July 8, 2016. Pre-registration is required.

If you register for this program and cannot attend, please call the chapter office at (609)-588-0030 to cancel.

Questions? Email Angela Kavanaugh at Angela@cainj.org or call (609) 588-0030.

COMMUNITY ACADEMIC INSTITUTE - 2016 LECTURE SERIES REGISTRATION FORM

Name/ Designation: _____

Company/Firm: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

Email: _____

Pre-Registration is required. If you register for this program and cannot attend, please call the chapter office at (609) 588-0030 to cancel.

This event requires a cancellation notice at least 72 hours in advance. If a notice is not received, a \$25 cancellation fee will be charged per registrant. Substitutions are permitted if you cannot attend.

Questions? Email Angela Kavanaugh at angela@cainj.org or call (609) 588-0030

CAI-NJ Members: **FREE**

Non-Members: \$25

Payment Methods:

1. Pay by check, payable to CAI-NJ. Mail completed form to:
CAI-NJ
Attn: CAI-NJ 2016 Lecture Series
500 Harding Rd.
Freehold, NJ 07728
2. Pay by credit card. Please fax to (609) 588-0040 or email: Angela@cainj.org

Cardholder Name: _____

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Signature: _____

*Cardholder acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth in the cardholder's agreement with issuer

CONTINUING EDUCATION NOTICE:

By successfully completing this program, the New Jersey Chapter of Community Associations Institute (CAI-NJ) will approve a half day of credit for this program towards the Professional Management Development Program (PMDP).

For CAI-NJ Office Use Only

Exp: _____