

# NJ AGENTS

## CONFERENCE

Full Name \_\_\_\_\_ Accreditations \_\_\_\_\_

Badge Name \_\_\_\_\_ Big I NJ Member? \_\_\_\_\_

Agency/Company \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### ADDITIONAL REGISTRANT/SPOUSE

Name \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

### REGISTRATION PACKAGES

#### MEMBER/SPONSOR FEES:

- \$295 - Full Access, First Registration
- \$275 - Additional Registration Same Agency
- \$240 - Guest/Spouse
- \$215 - Monday-Only Package

#### NON-MEMBER FEES:

- \$485 - Full Access, First Registration
- \$325 - Guest/Spouse
- \$385 - Monday-Only Package

### OPTIONAL ACTIVITIES - PRE-REGISTRATION IS REQUIRED *(choice of one)*

- \$25 - Ghosts of Cape May Trolley Tour
- \$25 - Nauti Spirits Distillery *(fee covers transportation to and from distillery)*

### PAYMENT INFORMATION

Total Cost \_\_\_\_\_ Payment Method \_\_\_\_\_

*Checks should be made out to Big I NJ.*

Credit Card Number \_\_\_\_\_

Exp. (xx/xx) \_\_\_\_\_ CVV Number \_\_\_\_\_

Bill Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

- I authorize Big I NJ to charge my credit card for the amount listed above. Funds over the amount indicated as the total will be charged only in the event the total fee is under-calculated.

Return to Jennifer Kacmarsky, [jkacmarsky@biginj.org](mailto:jkacmarsky@biginj.org), fax: 609-587-4515, 2211 Whitehorse-Mercerville Road, Trenton, NJ 08619. Cancellations received by October 1, 2025 will incur a \$50 administrative fee. Cancellations after that date result in a forfeiture of all fees.