

**North Dakota Grain Dealers Association  
Safety, Health & Environmental Conference**

Wednesday, March 22, 2023

Location: Gladstone Inn

111 2<sup>nd</sup> Street NE, Jamestown, ND

Registration: 8:15 a.m. – Seminar/Training 8:50 a.m. to 4:00 p.m.

Cost: \$100 NDGDA Members/S & H Clients / \$125 Non-Members

Registration will be \$10.00 higher at the door.

The purpose of this conference is to bring together grain facility managers, grain facility safety directors and federal, state and local regulatory agency representatives to learn, exchange ideas and receive updates on the grain industry safety & health.

**ROOMS** can be reserved by calling the Gladstone Inn at 701-252-0700 prior to **March 14, 2023**. Please request the NDGDA group room rate (\$67.99 plus tax) when making your reservations.

The tentative agenda for Wednesday, March 22, 2023 includes the following:

- DOT Update
- Medical Marijuana – Brenda Borders, Northern Testing, Inc.
- WSI Program Incentives & Grants
- Mental Health – Village Family Services

**COMPLETE THE FORM BELOW & SEND BACK WITH YOUR CHECK OR  
CREDIT CARD INFORMATION BY MONDAY, MARCH 20.**

*Registration can also be completed with a credit card online by going to:  
<https://www.ndgda.org/events/Safety-Health-Environmental-Conference-1>*

**Mail to: NDGDA, 2417 N University Dr, Suite A, FARGO, ND 58102**

<b>Name</b> _____	<b>Company</b> _____
<b>Name</b> _____	<b>Company</b> _____
<b>Name</b> _____	<b>Company</b> _____
<b>Name</b> _____	<b>Company</b> _____
<b>Address</b> _____	
<b>City</b> _____	<b>State</b> _____ <b>Zip</b> _____
<b>Phone</b> _____	<b>Email</b> _____

**Number of People @ \$100.00 each (includes light continental breakfast & lunch) =** \_\_\_\_\_  
**(Total)**

Credit Card Information				
Card Type	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA	<input type="checkbox"/> Discover	<input type="checkbox"/> AMEX
Cardholder Name (as shown on card): _____				
Card Number: _____				
Expiration Date (MM/YY): _____		CVV/CID: _____		
Cardholder ZIP Code (from credit card billing address): _____				
Customer Signature: _____				Date: _____