

**Municipal
Joint Insurance
Fund** 

South Jersey Communities Securing Their Future
P. O. Box 530, Marlton, New Jersey 08053

To: Municipal Clerks
Fund Commissioners

From: Kris Kristie, Sr. Account Representative

Date: October 31, 2018

Re: Elected Officials Seminar

Please accept this memorandum as an invitation to the 2018-2019 JIF Elected Officials training program. This year's program will focus on public official's liability, employment practices liability; cyber liability, and wellness program benefits. The goal of this training is to make our Elected Officials aware of the potential impact of their actions on their municipality, and potential personal exposure, while acting in official capacity.

As in the past, the New Jersey Municipal Excess Liability Joint Insurance Fund (MEL) will reduce each member's 2019 MEL Assessment by \$250 for each municipal Elected Official who completes the course by May 1, 2019. This credit is also extended to the member's CEO (i.e. municipal manager/administrator). The maximum credit for each member is 5% of the member's 2019 MEL Assessment.

The schedule of local Elected Official's training seminars is listed below. You are welcome to attend any of the sessions listed. To register, please complete the attached form and return it to Sheila Ortiz at our office.

Locally, the dates & location of this training is as follows:

Registration for all seminars is 5:30 PM – 6:00 PM. Seminars are from 6:00pm – 8:00 pm

Thursday, December 6, 2018 – Merighi's Savoy Inn, Vineland

Thursday, January 31, 2019 – Nicolosi's Caterers, West Deptford

Wednesday, February 6, 2019 – Merighi's Savoy Inn, Vineland

Thursday, March 21, 2019 – O'Connor's, Eastampton

Please feel free to contact my office if you have any questions.

cc: Risk Management Consultants

PLEASE RESPOND NO LATER THAN 2 WEEKS PRIOR TO ANY TRAINING DATE!

ELECTED OFFICIALS RISK MANAGEMENT SEMINAR

REGISTRATION FORM

Please Print

Course Date/Location: _____

Name: _____

Title: _____

Municipality: _____

Contact: _____

Phone Number: _____

Fax: _____

E-Mail: _____

Forward the completed form to:

Ms. Sheila Ortiz

Arthur J. Gallagher Risk Management Services

PO Box 530

Marlton, NJ 08053

E-Mail: Sheila_Ortiz@ajg.com

Fax: (856) 446-9149

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