



# TIME IS RUNNING OUT!

Time is running out! Failure to comply with the Sexual Harassment Prevention Training by December 31<sup>st</sup> could cost your company \$10,000.

In 2005, the California Legislature passed AB1825, which absolutely **REQUIRES** employers to provide sexual harassment prevention training for supervisory and management personnel in companies with 50 or more employees.

Be aware that **NOT ALL EMPLOYEES NEED BE LOCATED IN CALIFORNIA**. Further, **NOT ALL EMPLOYEES** need to be working **WITHIN** your company. Anyone working for your company pursuant to a contract, acting as an agent, independent contractor, temporary employee, etc., counts toward the 50 employee requirement.

Under both California and Federal law, employers (landlords) may be liable for the sexual harassment of employees by their supervisors or ANY person working for them, if that person is found guilty of improper words or actions towards any tenant, guest of a tenant, fellow worker or vendor.

Our speaker will be Christine Baran, Esq., who is an attorney with Fisher and Phillips. She is a respected writer and trainer in Southern California on the many liability threats facing landlords and managers of rental property.

This class satisfies the requirements of the AB1825 mandate for sexual harassment prevention training. Attendees will receive a Certificate of Completion.

**Space is limited, so reserve now.** Choose from three convenient dates:

<b>Date:</b>	<b>11/6/07</b>	<b>11/6/07</b>	<b>12/5/07</b>
<b>Time:</b>	<b>9:30 a.m. Registration</b>	<b>1:30 p.m. Registration</b>	<b>9:30 a.m. Registration</b>
	<b>10:00-12:00 p.m. Seminar</b>	<b>2:00-4:00 p.m. Seminar</b>	<b>10:00-12:00 p.m. Seminar</b>

**Place:** Apartment Association Education Center  
333 W. Broadway, Suite 101, Long Beach, CA 90802

<b>Price:</b>	<b>\$69.00</b>	<b>Premier or Management Company Members</b>
	<b>\$79.00</b>	<b>Basic Members</b>
	<b>\$99.00</b>	<b>Non-members</b>

## REGISTRATION FORM

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Name \_\_\_\_\_ Member # \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ List of Attendees \_\_\_\_\_

Enclosed is my check for \$ \_\_\_\_\_ for \_\_\_\_\_ people.  
NUMBER

Charge my:  MasterCard  Visa  American Express  Discover  Bill me

Account # \_\_\_\_\_ Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_ Expiration Date \_\_\_\_\_ Last 3 #s on back of card \_\_\_\_\_



**Mail with payment or credit card information to:**

Apartment Association, California Southern Cities  
333 W. Broadway, Suite 101, Long Beach, CA 90802

Fax: (562) 424-3764 ♦ Email: [info@apt-assoc.com](mailto:info@apt-assoc.com)

***No refunds unless cancellation is received 72 hours in advance of program. Questions? Call (562) 426-8341***