

The Changing Landscape of HR in Minnesota

How Are You Responding to Recent and Upcoming Changes?

Wednesday, November 15, 2023

11:30 a.m. – 1:00 p.m.

**Auer Steel
865 Xenium Ln N
Plymouth, MN 55441**

Why Attend This Program?

Frankly, A LOT has changed, and it all affects YOUR business. This isn't a topic that's "good to know," this is a topic that you **HAVE TO KNOW!** We'll cover the law, but this isn't a legal program. This program is about **real-world, practical advice and solutions** that you can use.

About the Instructors

Ian and Susan Schotanus are the owners of The Big Picture Consulting (TBPC). They have spent the last decade working exclusively with Residential & Commercial Service Providers across the country, helping them overcome their toughest employee management, giving clients information they need to make the most qualified business decision possible for any situation your business faces!



Topics We Will Cover

- Marijuana
- Sick Leave
- Paid Family Leave
- Concealed Carry
- Non-Compete Clauses
- Wage Protection for Construction Companies

Best of all, we're leaving time to answer your questions too. Provide your question(s) in advance using the registration form or ask them during the program.

This program is recommended for owners, managers, and anyone in your business with HR responsibilities.

Space is limited to 50 attendees. Register today by completing the form below!

For additional information about this program or MHCA membership, contact MHCA at (888) 782-6815.



Do You Know What You Should Do?

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\$20.00 for MHCA Members. \$40.00 for Non-Members.

ATTENDEE INFORMATION

(Copy Form for Additional Registrants)

Name: (first) _____ (last) _____
Name: (first) _____ (last) _____
Company: _____
Address: _____
City: _____ State: _____ Zip _____
Phone: (_____) _____ Fax: (_____) _____
Email: _____

REGISTRATION FEE

	Member	Non-Member
Attendee	\$20.00 per person	\$40.00 per person
# Attendees	_____	_____
Total	\$ _____	\$ _____

**JOIN MHCA FOR \$449.00 AND SAVE \$20.00 PER
PERSON ON THIS PROGRAM AND
SAVE ON ALL OUR PROGRAMS!**

PAYMENT INFO

Credit Card: VISA MasterCard Discover AmEx

Name on Credit Card: _____

Billing Address: _____

CC Number: _____ Exp Date: _____ CVC Code: _____

Check: Payable to "MHCA"

My question(s) for the speaker is (are):

Mail, fax, or email completed registration form to:
Minnesota Heating and Cooling Association
5625 Xerxes Ave N, Suite C Box #167
Brooklyn Center, MN 55430

Phone: 888-782-6815
Fax: 888-287-4116
Email: jane@assocmgmtservices.com