ANNOUNCEMENT OF 346TH QUARTERLY MEETING

DATE: Tuesday, September 17, 2019
TIME: 8:30 AM - 3:00 PM
LOCATION: Carrol County Agricultural Center
706 Agricultural Center Drive, Westminster, MD 21157

REGISTRATION: $20.00 (Member); $40.00 (Regulatory Non-Member);
$60.00 (Associate Non-Member)

REGISTRATION DEADLINE = September 10, 2019

AGENDA

8:30 - 9:00 REGISTRATION

9:00 - 10:00 FOOD SAFETY IN THE AGE OF SOCIAL MEDIA
Patrick Quade, CEO, IWasPoisoned.com

10:00 –11:00 MARYLAND’S NEW EDIBLE CANNABIS PRODUCT REGULATIONS
Mathew Swinburne, J.D., Association Director, Network for Public Health Law

11:00 - 12:00 VAPING: PROMISE OR PERIL
Kathleen Susan Hoke, J.D., Director, Legal Resource Center for Public Health Policy, and
the Network for Public Health Law

12:00 - 1:00 LUNCH – (OWN YOUR OWN, MANY RESTAURANTS NEARBY)

1:00 - 2:00 EDIBLE CANNABIS PRODUCTS: ANALYSIS OF CURRENT BEST PRACTICES IN THE U.S.
Aurash Jason Soroosh, Cannabis Infused Product Safety Analyst, Maryland Medical
Cannabis Commission

2:00 – 3:00 LEGISLATIVE CHANGES TO COMAR 10.15.03
Kim Burns, Office of Food Protection, Maryland Department of Health

5 HOURS OF TRAINING REQUESTED FROM LEHS BOARD
346th Quarterly Meeting

Registration Form

Registration Form and payment must be received on or before

September 10, 2019

(Please print clearly)

Full Name _______________________________________________________________________

Affiliation _______________________________________________________________________

E-mail Address _____________________________________________________________________

Telephone No. _____________________________________________________________________

**** All registrations are due by September 10, 2019 ****

NOTE: Membership dues may also be paid at the door or online at: www.casafdo.org

Dues:
Regulatory members $15.00
Associate members $35.00
Retired members $10.00
Academia members $10.00

Meeting Registration Fees:
$20.00 (Member)
$40.00 (Regulatory Non-Member)
$60.00 (Associate Non-Member)

Dues for 2019 $__________ (if unpaid, choose amount above and insert)

Registration: Registration Fee $__________

Total Amount $__________

Please make checks payable to “Casa”. Mailed registrations are due by September 10th:

Please Note Our New Mailing Address:
LISA KALAMA
c/o CASA
P.O. BOX 1413
BEL AIR, MD 21014