



Registrant's FULL NAME (Printed on Name Badge): \_\_\_\_\_

Registrant's JOB TITLE (Printed on Name Badge): \_\_\_\_\_

Company Name or University (Printed on Name Badge): \_\_\_\_\_

City (Printed on Name Badge): \_\_\_\_\_ State: \_\_\_\_\_

Registrant's Email: \_\_\_\_\_

Registrant's PHONE NUMBER: \_\_\_\_\_ Dietary Requests: \_\_\_\_\_

**Mailing Address**

Address Line: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_ State: \_\_\_\_\_

**ADVANCED REGISTRATION OPTIONS**

- |   |       |
|---|-------|
| <input type="checkbox"/> General/Private Sector Registration (3-Day)                      | \$475 |
| <input type="checkbox"/> General/Private Registration (1-Day): W, Th, or Fri (circle day) | \$280 |
| <input type="checkbox"/> Government/Public Sector Registration (3-Day)                    | \$385 |
| <input type="checkbox"/> Govn't/Public Registration (1-Day): W, Th, or Fri (circle day)   | \$250 |
| <input type="checkbox"/> Student Registration (3-Day): full-time university student       | \$110 |
| <input type="checkbox"/> Student Registration (1-Day): W, Th, or Fri (circle day)         | \$60  |
| <input type="checkbox"/> Guest Registration (3-Day: all access, but no PDHs)              | \$180 |
| <input type="checkbox"/> Extra Wednesday Social Ticket                                    | \$80  |
| <input type="checkbox"/> Extra Awards & Casino Night Gala Ticket                          | \$80  |

## PAYMENT METHOD

Name on Card: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

\_\_\_\_\_ Credit Card Number

\_\_\_\_\_ CVC \_\_\_\_\_ / \_\_\_\_\_ Expiration Date Month/Year

\_\_\_\_\_ Check/Money Order

**TOTAL: \$** \_\_\_\_\_

Make check out to "Texas CECON" and mail to:  
IMPlanners, P.O. Box 10307, Corpus Christi, TX 78460-0307

Advance Registration ends August 30, 2024