

Registrant's FULL NAME (Printed of	on Name Badge):		
Registrant's JOB TITLE (Printed on	Name Badge):		
Company Name or University (Pr	inted on Name Badge):		
City (Printed on Name Badge):		State:	
Registrant's E-mail:			
Registrant's PHONE NUMBER:		Dietary Requests:	
Mailing Address			
Address Line:			
Address Line 2:			
City:	Zipcode:	State:	

## **EARLY BIRD REGISTRATION OPTIONS**

General Registration (3-Day)	\$475
General Registration (1-Day): W, Th, or Fri (circle day)	\$300
Government Registration (3-Day)	\$400
Government Registration (1-Day): W, Th, or Fri (circle day)	\$270
Student Registration (3-Day)	\$110
Student Registration (1-Day): W, Th, or Fri (circle day)	\$60
Guest Registration (3-Day; all-access but no PDHs)	\$220
Extra Wednesday Social Ticket	\$100
Extra Awards & Casino Night Gala Ticket	\$100

## Visit texascecon.org/registration/ to view the full rate chart

## **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	

Early Bird Registration ends July 31, 2025