

GROUP REGISTRATION FORM ⚡ **February 6-10, 2017** ⚡ **Austin, Texas** ⚡ **Austin Convention Center**

STEP ONE: Distribute the following page “Attendee Information” and have each registrant return completed information to you for final group processing. Once you have all the information, you can begin processing your group registration at www.tceaconvention.org/register.

STEP TWO: Have your credit card payment or a copy of your purchase order ready to upload. If you do not have either, you may select “Send Invoice” to generate an invoice. Please note that a purchase order, check payment, or credit card is due within 30 days or all registrations may be cancelled.

If you are paying by credit card, you will need the following information:

- Name on Credit Card
- Card Number
- Expiration Date
- Security Code (3 digit Visa/Mastercard, 4 digit American Express)

If you are paying by Purchase Order or requesting an invoice, you will need the following information:

- Accounting/Billing Contact Name, Phone Number, and Email Address
- Billing Address

STEP 3: Make Hotel Reservations

Hotel reservations will only be approved for registered attendees. You will receive a link at the end of the registration process that you can use to secure housing. Use this cheat sheet to prepare. A list of hotels with pricing is located at: www.tceaconvention.org/2017/attendees/location-travel-and-hotel

Hotel reservations require a credit card to confirm the reservation. You will need the following information:

- Name on Credit Card
- Card Number
- Expiration Date
- Security Code (3 digit Visa/Mastercard, 4 digit American Express)

During a group registration, you can make up to five registrations and hotel reservations at a time.

HOTEL PREFERENCE

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Room 1:

Guest #1: _____

Sharing with:

Guest 2: _____ Guest 3: _____ Guest 4: _____

Check-in Date: _____ Check-out Date: _____

Room 2:

Guest #1: _____

Sharing with:

Guest 2: _____ Guest 3: _____ Guest 4: _____

Check-in Date: _____ Check-out Date: _____

Room 3:

Guest #1: _____

Sharing with:

Guest 2: _____ Guest 3: _____ Guest 4: _____

Check-in Date: _____ Check-out Date: _____

The following information is needed to register you for the TCEA 2017 Convention & Exposition. Please complete all fields and return to the person responsible for registering your group.

ATTENDEE INFORMATION:

Mr.	Mrs.	Ms.	Dr.
_____		_____	
First Name	Last Name	Suffix	
_____		_____	
Title	Phone		
_____		_____	
Email Address	Twitter Handle		
Mailing Address: _____			
_____		_____	_____
City	State	Zip	

ATTENDEE DEMOGRAPHICS:

What best describes your role?	_____
Gender:	_____
Age:	_____
What best describes the grades you reach?	_____
How many years have you been in education?	_____
Would you like to receive postal mail invitations from TCEA 2017 vendors? <i>Email addresses are not provided.</i>	_____

REGISTRATION TYPE

Premium	Basic	Exhibit Hall Only
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