

**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 [convention.tcea.org/register](http://convention.tcea.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 canceled.

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: [convention.tcea.org/attendees/location-travel-and-hotel](http://convention.tcea.org/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 2019 TCEA 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 2019 TCEA vendors? <i>Email addresses are not provided.</i>	_____

REGISTRATION TYPE

Full Registration	Exhibit Hall Only
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**To ensure accuracy of information, TCEA no longer processes group registrations. Proceed to [convention.tcea.org](http://convention.tcea.org) to input all information into the system to complete the registration process.**