

96th Annual IACTE Conference and Annual Meeting Registration Form

February 19-20, 2026 ● President Abraham Lincoln DoubleTree by Hilton, Springfield, Illinois

Name				Emplo	Employer				
Title				City, S	City, State, Zip				
Address				IEIN # or NA					
Phone					Email				
Please check one primary affiliate: IAVAT IBEA ICTA IFACSTA IHOA ICTESSPA INRS TEA of IL Please check one or more (if appropriate): First-Timer Retired Student First-Year Teacher IACTE Past-President *In order to receive the Early Bird rate, payment must be received by December 15, 2025*								nt	
IACTE 2026 Individual Registration Rates				Meals					
Includes all meals	Early Bird By: Dec. 15	Regular After: Dec. 15	Late After Feb. 1	Total	included in	the registr	each meal you plan to ation fee. IACTE must of the number served	pay for the number	
IACTE Professional Member	\$300	\$350	\$400		Thursday, Feb. 19	☐ Yes Breakfast	☐ Yes Opening Luncheon	☐ Yes Networking Reception	
Retired/Student Member	\$200	\$225	\$250		Friday, Feb. 20	☐ Yes Breakfast	☐ Yes Closing Luncheon		
Nonmember	\$400	\$425	\$475		List special	List special dietary needs:			
Undergrad Student Registration – One Day Only Includes one lunch Total									
Student Membe			\$30	Total		Method of Payment			
Student Nonmer			\$40		☐ Check ☐ Purchase Order Purchase Order #				
		one farier	7 10		☐ Credit Ca	☐ Credit Card (complete authorization form on second page)			
IACTE Membership dues - or join or renew online or download form at www.illinoisacte.org and send with registration form Total Amount Due				A check or P.O. must accompany registration. Please make all checks payable to the Illinois Association for Career and Technical Education. Return this registration form with your check or P.O. number to Cathy Carruthers, 803 Enos Lane, Godfrey, IL 62035,					
						-	thers@outlook.com.		
Conference Hotel Information: IACTE has secured a special conference hotel rate at the President Abraham Lincoln-DoubleTree in Springfield, Illinois, of \$138 plus tax for Single/Double. Book here or call 217-544-8800, and use group Code CTE. The deadline to book at this rate is January 28, 2026, or until rooms are sold out.				Refund requests must be in writing and will be honored until February 1, 2026. A \$50.00 handling fee will be assessed. For questions, please contact Cathy Carruthers at iacte.carruthers@outlook.com or (618) 978.4787.					

Professional Development Hours will be available for each breakout session with the opportunity to earn 10 Professional Development Hours.



Credit Card Authorization Form

Name of individual authorizing of	redit card payment*		
Email Address (where to email re	eceipt)		
Billing Address			
School/Business			
First Name	Last Name		
Address			
City	State	Zip Code	
Credit Card Information			
Credit Card/Debit Card #			
Expiration Date			
Security Code			

*Convenience fee of 3% will be added to your credit card purchase total