

ALABAMA EDUCATIONAL TECHNOLOGY CONFERENCE REGISTRATION FORM

June 15 - 17, 2022

SHARING OF A CONFERENCE REGISTRATION OR NAME BADGE IS STRICTLY PROHIBITED. Registration is for one individual to attend the entire conference and cannot be used by anyone other than the person named on the registration. Attendees are required to show ID onsite to check-in and pick up their name badge. No one will be permitted to check-in for another attendee.

Email _____

Dr. ___ Mr. ___ Mrs. ___ Ms. ___ First Name _____ Last Name _____

School/Organization _____ Job Title/Position _____

Address _____ City _____ State _____ Zip _____

Work Phone (_____) _____ - _____

Cell Phone (_____) _____ - _____ District _____

Demographics (please check one box in each category):

Position: <input type="checkbox"/> Superintendent <input type="checkbox"/> Central Office Personnel <input type="checkbox"/> School Support Personnel <input type="checkbox"/> Principal <input type="checkbox"/> Counselor <input type="checkbox"/> Media Specialist <input type="checkbox"/> Career/Tech Education <input type="checkbox"/> Special Education <input type="checkbox"/> Teacher <input type="checkbox"/> Student <input type="checkbox"/> Consultant <input type="checkbox"/> System Technology Coordinator <input type="checkbox"/> School Technology Coordinator <input type="checkbox"/> Vendor	Level: <input type="checkbox"/> Elementary <input type="checkbox"/> Middle/Jr High <input type="checkbox"/> High School <input type="checkbox"/> College/University <input type="checkbox"/> District <input type="checkbox"/> SDE <input type="checkbox"/> Private <input type="checkbox"/> Vendor	Optional: <input type="checkbox"/> I am a first-time attendee at AETC. <input type="checkbox"/> I do not want my name released to Exhibitors. <input type="checkbox"/> I require special assistance covered under the Americans With Disabilities Act. (You will be contacted concerning arrangements.)
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REGISTRATION OPTIONS:

	2/1/22 - 4/18/22	4/19/22 - 5/27/22	After 5/27/22
<input type="checkbox"/> IN-PERSON FULL CONFERENCE* <small>*AETC Full Conference registration includes admission to all sessions including Keynote, Featured Speakers, Workshops, Exhibitors and access to any Virtual Content.</small>	\$140	\$150	\$175
CLOSING SESSION** (Friday, June 17, 8:00am – 11:00am) <i>Breakfast Included.</i> <small>** Featuring Keynote Speaker Leslie Fisher and Door Prizes</small>	<input type="checkbox"/> Yes, I plan to attend <input type="checkbox"/> No, I do not plan to attend		

PAYMENT INFORMATION:

Credit Card (VISA/MasterCard/AMEX) may be made by registering online at: www.alabamaetc.com

Check/Money Order attached (FEIN# 02-0701975)

Purchase Order – Attach copy of Purchase Order

Purchase Order # _____ Billing Organization: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Register Online at: www.alabamaetc.com
 or
Mail form and payment to:
 AETC c/o McRae & Company, Inc.
 1401 Maclay Commerce Drive
 Tallahassee, FL 32312
 or
Email to: AETCreg@mcraemeetings.com

Substitution: I am replacing: _____ **who will not attend.**
 (Name of Registered/Paid Attendee)

NOTE: All conference registration fees are non-refundable, however, substitutions are allowed.

For office use only:
 Date rec'd: _____ Amt Paid: \$ _____ Check# _____ Type: C S P O Amt Due: \$ _____