



**HLP Palooza  
Registration Form**

**Basic Registration Information**

<b>Registration Types</b>	<b>Registration Rates</b>
<input type="checkbox"/> CEC Student Member	\$40
<input type="checkbox"/> CEC Member	\$99
<input type="checkbox"/> Non-Member	\$149
<input type="checkbox"/> CEC Student Member Registration & Book Bundle	\$66.95
<input type="checkbox"/> CEC Member Registration & Book Bundle	\$125.95
<input type="checkbox"/> Non-Member Registration & Book Bundle	\$183.95

\*All registration types get you access to the recordings for **ALL** the HLP Palooza sessions whether you can attend live or not.

**Payment Options**

**ONE REGISTRANT PAYMENT OPTIONS**

**One Registrant Pay with Purchase Order:**

- **Online** - with a Purchase Order: [https://form.jotform.com/CEC\\_Member\\_Services/2024-hlp-palooza-registration-form](https://form.jotform.com/CEC_Member_Services/2024-hlp-palooza-registration-form)

**One Registrant Pay with Credit Card:**

- **Online - Must log in or create a CEC account for the one registrant:** <https://info.exceptionalchildren.org/Event-Registration/EventID/228>
- **Pay by Phone:** 1-888-232-7733
- **Paper Form - Credit Card Information**
  - Number \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
  - Name on card: \_\_\_\_\_
  - Exp. Date \_\_\_\_/\_\_\_\_ CVV\_\_\_\_\_

\*To pay by credit card using this form, email it to [service@exceptionalchildren.org](mailto:service@exceptionalchildren.org) or fax to (703) 264-9494.

**MULTIPLE/GROUP REGISTRANT PAYMENT OPTIONS**

**Multiple/Group Pay with Purchase Order:**

- **Online** - with Purchase Order: [https://form.jotform.com/CEC\\_Member\\_Services/2024-hlp-palooza-registration-form](https://form.jotform.com/CEC_Member_Services/2024-hlp-palooza-registration-form)

**Multiple/Group Registrant Pay with Credit Card:**

- **Online** - with Credit Card: [https://form.jotform.com/CEC\\_Member\\_Services/2024-hlp-palooza-registration-form](https://form.jotform.com/CEC_Member_Services/2024-hlp-palooza-registration-form)
- **Pay by Phone:** 1-888-232-7733
- **This Paper Form - Credit Card Information**
  - Number \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
  - Name on card: \_\_\_\_\_
  - Exp. Date \_\_\_\_/\_\_\_\_ CVV\_\_\_\_\_

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## Registrant Information Options

### **ONE/INDIVIDUAL REGISTRANT INFORMATION**

Name (required): \_\_\_\_\_

Registrant Email (required): \_\_\_\_\_

School/Organization/Employer: \_\_\_\_\_

School/Organization/Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Accommodations: CEC is committed to providing an inclusive professional development experience and will work to assure accessibility to the best of our ability. We will use Zoom auto-generated captions for this event. CEC can most effectively meet accommodation needs if you submit your requests no later than **April 17, 2024**. If you would like to request an accessibility accommodation for one of the registrants, please indicate below. A CEC staff member will contact you to learn more about how to fulfill your request.

Does this Registrant require any accessibility accommodations beyond closed captioning?

Yes (please share more details below)

No

Please describe the accommodation request here: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **MULTIPLE/GROUP OF REGISTRANTS INFORMATION**

#### **\*\*Looking to register another person or a group?**

- o Option 1: Add each registrant to [this spreadsheet](#) and include it with this form and the payment information. Click on the words "this spreadsheet" to open the spreadsheet and complete it.
- o Option 2: Complete the One/Individual Registrant sections of this form (Registration Rates, Registrant Info, and Registrant Seminar Choices) for each registrant. Then include all the pages with the original form that has the payment information on it.