CONFERENCE REGISTRATION FORM

March 10–13, 2027 • Long Beach Convention Center

1. REGISTRATION INFORMATION

Must choose one Registration Type: ☐ Administrator ☐ Teacher ☐ Paraeducator ☐ Parent ☐ College/University Student ☐ School Board ☐ College/University Faculty ☐ High School Student Academy

First Name: _____ Middle Name: _____ Last Name: _____

Affiliation/Organization/School District (will appear on name badge): _____

**Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Work/Office Phone #: _____ **Attendee Email Address _____ Other Email Address: _____

☐ YES, I would like to request an interpreter for General Sessions. My preferred language is: _____

☐ I prefer that my name, address, and email not be shared. ☐ Any special needs? _____

** PLEASE NOTE: ALL INFORMATION WILL BE MAILED TO YOUR MAILING ADDRESS AND TO YOUR EMAIL ADDRESS

2. CONFERENCE FEES

	Full Four-Day Conference Fees			One-Day Conference Fees (Please choose the day you would like to attend)			Saturday Special
Registration Type	**Extra Early Bird on/before 11/12/26**	**Early Bird on/before 1/14/27**	**After 1/14/27**	**Extra Early Bird on/before 11/12/26** ☐Wed ☐Thu ☐Fri	**Early Bird before 1/14/27** ☐Wed ☐Thu ☐Fri	**After 1/14/27** ☐Wed ☐Thu ☐Fri	**Saturday Only**
Administrator | School Board Teacher | College/University Faculty	☐ $915	☐ $965	☐ $995	☐ $560	☐ $580	☐ $610	☐ $355
Parent | Paraeducator College/University Student	☐ $570	☐ $610	☐ $730	☐ $435	☐ $455	☐ $475	☐ $345

3. PROFESSIONAL DEVELOPMENT DAYS

☐ This registration form is part of "pay for 15 and receive 1 free registration. All 15 registrations must be of the same type—either a full four-day pass or a one-day pass.

☐ Paid Registrant ☐ Complimentary (FREE) Registration (16th person.) Refer to registration regulations for further details. **Registration Total** $

4. PAID EVENTS (Pre-Conference Institutes and Events) *MUST indicate the 1st and 2nd choice or option will be chosen based on availability.

☐ (SSV) School Site Visits—$100 Wednesday. See descriptions and use code number. (i.e., #1A, #2A, #3A, etc.)	First Choice	Second Choice	$
☐ Half-Day Pre-Conference Institute: Biliteracy by Design Forum —Wednesday, 3/10/27 Pre-Registration is required. For more information, please visit **cabe2027.org/bdf.**			$ FREE
☐ (2DI) 2-Day Institutes—$250 Wednesday and Thursday, 3/10/27 & 3/11/27. See descriptions and use code number. (i.e., #1, #2, etc.) Lunch included. ☐ Vegetarian ☐ Vegan	First Choice	Second Choice	$
☐ High School Student Leadership Academy —$200 Thursday, 3/11/27. Lunch included. ☐ Vegetarian ☐ Vegan			$
☐ (ALS) Administrative Leadership Symposium— Friday, 3/12/27 Paid attendees may attend, if space is available, for an additional $100. Lunch included. ☐ Vegetarian ☐ Vegan *(Superintendents, Assistant Superintendents, & Board Members, please contact: info@gocabe.org for complimentary registration.)*			$
Paid Events Total			$

5. EVENT TICKETS (Due to limited capacity, meal tickets may not be available onsite.):

☐ (CAL) CABE Award Luncheon, Thursday, 3/11/27 ☐ Vegetarian ☐ Vegan	$100 ea. x No. of Tickets _____	$
☐ (SEB) Seal of Excellence Banquet, Friday, 3/12/27 ☐ Vegetarian ☐ Vegan	$120 ea. x No. of Tickets _____	$
	Event Tickets Total	$

6. PROGRAM & PROCESSING FEE

Avoid paying $100 Registration Processing Fee for Mail-in, Fax, and Email Registrations • SAVE MONEY by Registering Online at cabe2027.org	**Processing Fee**	$100.00
(Please add Registration, Pre-Conference Institutes, and Events Tickets.)	**GRAND TOTAL**	$

7. PAYMENT INFORMATION

☐ P.O. ☐ Check (Make check payable to CABE) ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover ☐ Check Number/P.O. Number: _____

Credit Card Number:: _____ Expiration Date: _____ CVV: _____

Billing Street Address: _____ City: _____ State: _____ Zip Code: _____

Signature: _____ Date: _____