

# I-Grow Summit Registration

June 23-24, 2024

EMAIL COMPLETED FORM TO:  
workshops@ilprincipals.org  
Illinois Principals Association

☐ \$249 Individual Registration

## Group Rates for individuals from the same district or organization:

- ☐ \$239 per attendee (3-5 participants)  
☐ \$225 per attendee (6-10 participants)  
☐ \$215 per attendee (11+ participants)



This event is for PD hours only. It is not eligible for administrator academy credit.

Name _____	School and District _____
Title _____	E-mail _____
IEIN _____	<input type="checkbox"/> Food allergies/dietary restrictions (specify) _____
Name _____	School and District _____
Title _____	E-mail _____
IEIN _____	<input type="checkbox"/> Food allergies/dietary restrictions (specify) _____
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Name _____	School and District _____
Title _____	E-mail _____
IEIN _____	<input type="checkbox"/> Food allergies/dietary restrictions (specify) _____

Attached additional sheets as necessary.

## Payment information is required to process registration:

Total Due \$ \_\_\_\_\_

☐ Check # \_\_\_\_\_  
Make payable to the Illinois Principals Association.

☐ Purchase Order # \_\_\_\_\_  
Send invoice to: ☐ District ☐ School ☐ Home

Billing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Credit Card # \_\_\_\_\_ Exp. \_\_\_\_\_  
☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

CVV \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

Today's Date \_\_\_\_\_

Registrations will not be accepted over the phone. All registration changes and cancellations must be received in writing by the IPA. Individuals who do not cancel their reservation and are not in attendance are responsible for full payment. Refunds will be subject to a \$25 service charge.

workshops@ilprincipals.org  
ilprincipals.org

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217-525-7264 (fax)

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