



# ANNUAL

CONFERENCE & EXPO 2025

## IISE ANNUAL CONFERENCE AND EXPO 2025 STUDENT REGISTRATION FORM

### REGISTRATION FEES

	Early Bird Before Feb. 16	Advanced Feb. 17 - April 30	Standard Rate May 1 - June 3
<input type="checkbox"/> STUDENT MEMBER	\$470	\$530	\$590
<input type="checkbox"/> STUDENT NON-MEMBER*	\$520	\$575	\$635

All prices are in U.S. dollars (USD).

**\*\*Student Registration** - IISE student members will be able to register online using their member IDs. Not a student member? Join now to save on conference registration fees and enjoy additional member benefits and savings immediately. Or, As a non-member, email registration form accompanied by documentation showing full-time student status. A copy of your student ID will not be accepted. [cs@iise.org](mailto:cs@iise.org)

### SUNDAY WELCOME RECEPTION

RESERVE 1 COMPLIMENTARY TICKET FOR THE OPENING NIGHT RECEPTION SUNDAY, JUNE 1, 6 P.M. – 7:30 P.M.

PLEASE RESERVE \_\_\_\_ ADDITIONAL TICKET(S) AT A COST OF \$55 EACH

### ADDITIONAL EVENTS NOT INCLUDED IN YOUR REGISTRATION FEE:

#### NEW FACULTY COLLOQUIUM

SATURDAY, MAY 31, 8 A.M. – 5 P.M. – \$50  
(PRIOR APPROVAL BY CIEADH REQUIRED)

#### STUDENT SPONSORSHIP

I WISH TO PROVIDE ASSISTANCE TO A STUDENT TO HELP DEFRAY EXPENSES SO THAT THEY MAY ATTEND THE IISE ANNUAL CONFERENCE.  
\_\_\_\_ \$30 \_\_\_\_ \$20 \_\_\_\_ \$10

Please return completed registration form by email or mail to:

[cs@iise.org](mailto:cs@iise.org)

IISE, 3577 Parkway Lane, Suite 200, Norcross, GA 30092

*Please complete:*

Mr.  Mrs.  Ms.  Dr.

Last/Surname | First: \_\_\_\_\_

Preferred first name on badge: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

**Please check one:**  Company address  Home address

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Yes, I require special assistance services. Email your request to [cs@iise.org](mailto:cs@iise.org).

**Method of Payment:** (Conference fees are due in full at registration in U.S. currency only.)

Check – made payable to IISE

A check for \$ \_\_\_\_\_ is enclosed. Check # \_\_\_\_\_

Credit card – An invoice will be emailed to you once the registration form has been processed.

#### Cancellations and Substitutions:

Cancellations must be made in writing and mailed to IISE, 3577 Parkway Lane, Suite 200, Norcross, GA 30092. See website for refund deadline. Contact customer service at [cs@iise.org](mailto:cs@iise.org), (770) 449-0460, x102, or (800) 494-0460.