

OFFICIAL IACO 2021 FALL CONFERENCE REGISTRATION FORM

November 17-19, 2021 (Wed – Fri) Marriott Hotel Bloomington Normal, IL

Attendee Full Name: _____

First Name for Badge (if different): _____

Title/Office (e.g. Coroner/Auditor) _____

County/Jurisdiction (e.g. Lee County): _____

Address: _____

City/State/Zip: _____

Phone: (____) _____ Fax: (____) _____

E-mail: _____

MEAL TICKETS:

Please let us know whether or not you plan to participate in the following meals. There is no additional cost for these events, however, we need accurate head counts.

Wednesday:

FREE Lunch: Yes No Unsure

Bellwether Presents: Yes No Unsure

Thursday:

FREE Lunch: Yes No Unsure

Banquet: Yes No Unsure

Friday:

Breakfast Buffet: Yes No Unsure

Affiliate Organization:

EVERYONE IS REQUIRED TO REGISTER FOR THE CONFERENCE! A CONFERENCE NAME BADGE WILL BE REQUIRED FOR ADMITTANCE TO ALL SESSIONS!

- | | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Auditor | <input type="checkbox"/> County Board Member | <input type="checkbox"/> Circuit Court Clerk | <input type="checkbox"/> Sheriff | <input type="checkbox"/> Treasurer |
| <input type="checkbox"/> Board of Review | <input type="checkbox"/> County Clerk / Recorder | <input type="checkbox"/> Election Commission | <input type="checkbox"/> State's Attorney | <input type="checkbox"/> Veterans Assistance Commission |
| <input type="checkbox"/> Coroner | <input type="checkbox"/> County Engineer | <input type="checkbox"/> Reg. Superintendent | <input type="checkbox"/> Supervisor of Assessments | <input type="checkbox"/> Zoning Official |

Hotel Reservations:

YOU ARE RESPONSIBLE FOR MAKING YOUR HOTEL RESERVATIONS.

Reservations can be made at the Marriott Hotel Bloomington/Normal by visiting: <https://tinyurl.com/w2fyvt69>. Follow the steps to create your hotel reservations online. I do not recommend calling the hotel to make reservations. Often, you get forwarded to the central reservation line and they do not always have (or give) accurate information. If you need to call the hotel, call 309-862-9000 and ask for guest room reservations. The hotel will provide you with a confirmation number when you make your reservation. The group rate is **\$96.00** plus tax. Self-Parking is complimentary for those staying at the hotel.

The hotel block expires at midnight on October 26, 2021.

Reservations made and not cancelled 24 Hours prior to 4:00 pm day of will be billed for the first night's room and tax and the remaining nights reserved will be cancelled.

IF YOU HAVE PROBLEMS MAKING A RESERVATION (or are told they're sold out), contact Tamiko Kinkade via email at: tkcps@comcast.net and include the nights you need and the number of rooms you need.

How to Register for the Conference:

On-line Registration is available at www.iacoonline.org. Or, you can mail your registration form with payment. The early-bird registration deadline is November 5.

Cancellation Policy: Conference registrations made and not cancelled will be billed. Cancellations must be made in writing on or before November 10 to receive a refund. All refunds (less a \$25 processing fee) will be made via a check mailed to the attendee after the conference. Cancellations should be sent to the Conference Registrar at the address listed below or e-mail to tkcps@comcast.net or fax to (217) 529-7178.

Payment Information: The Conference Registration Fee is **\$195**, but register before Nov. 10 and receive the Early Bird Rate of **\$180**.

Early Bird After Nov. 5

- | | | |
|---|--------------|-------|
| <input type="checkbox"/> Full Conference Registration | | |
| County Official/Deputy | \$180 | \$195 |
| <input type="checkbox"/> WEDNESDAY Only (Official/Deputy)* | \$95 | \$115 |
| <input type="checkbox"/> THURSDAY Only (Official/Deputy)* | \$95 | \$115 |
| <input type="checkbox"/> Spouse/Guest or Retired Official** | \$75 | \$95 |

Spouse Name: _____

Total enclosed: _____

- Enclosed is a check for my registration
- Please apply the funds paid for the 2020 Spring Conference
- Please charge my credit card for registration

Card Type: Mastercard Visa American Express Discover

Card Number: _____

Exp. Date: _____ CVV: _____ Billing Zip: _____

Name on Card: _____

Signature: _____

***The One-Day Only Registration includes ONE day's activities (Wed. or Thurs.), NOT a combination of the two!** It is critical that everyone attending the conference register and pay a registration fee. Please register everyone from your office that is attending.

****The Spouse/Guest Fee DOES NOT apply to individuals employed by county offices. All county employees must register.**

Illinois Association of County Officials

Attn: Tamiko Kinkade, Administrator - P.O. Box 9296 - Springfield, IL 62791-9296

Phone: (217) 585-9065 Fax: (217) 529-7178