



2026 Conference Registration Form

Historias: Literacy Living Within Us
January 30–February 1, 2026

TCTELA Annual Conference sleeping room discount is available on a limited basis until January 14, 2026. Visit TCTELA.ORG for the link to reserve sleeping rooms online.

TCTELA MEMBERSHIP

Membership must be active at the time of registration and at the conference to receive the member rate. Membership is active for 12 months from the date of joining or renewing.

FULL CONFERENCE PACKAGE

Includes Friday through Sunday workshops, professional development luncheons, membership celebration, and poetry reading.

Before 12/12 ☐ Member \$409 ☐ Nonmember \$481
After 12/12 ☐ Member \$509 ☐ Nonmember \$581

Nonmember fee also includes a professional membership for one year.

THREE-DAY, A-LA-CARTE CONFERENCE PASS

Professional development meals are not included.

Before 12/12 ☐ Member \$295 ☐ Nonmember \$367
After 12/12 ☐ Member \$395 ☐ Nonmember \$467

Nonmember fee also includes a professional membership for one year.

PROFESSIONAL DEVELOPMENT LUNCHEON TICKETS

☐ Friday Professional Development with Anika Aldamuy Denise* \$59.50
☐ Saturday Professional Development with C. Thomas Howell* \$59.50

*Included with full conference pass.

UNDERGRADUATE STUDENT OR RETIRED CONFERENCE PASS*

Professional development luncheons are not included.

*Not working in the industry. (Consultants and teachers getting an advanced degree are considered professionals and should register at either the member or nonmember professional rate.)

☐ Retired ☐ Undergraduate Student
Before 12/12 ☐ Member \$225 ☐ Nonmember \$270
After 12/12 ☐ Member \$325 ☐ Nonmember \$370

Nonmember fee also includes a student or retired membership for one year.

ONE DAY CONFERENCE PASS

Professional development meals are not included.

Before 12/12
☐ Friday ☐ Saturday ☐ Member \$215 ☐ Nonmember \$287
☐ Sunday ☐ Member \$135 ☐ Nonmember \$207

After 12/12
☐ Friday ☐ Saturday ☐ Member \$315 ☐ Nonmember \$387
☐ Sunday ☐ Member \$235 ☐ Nonmember \$307

☐ Suggested Community Outreach Donation \$1 (include in total)

Areas of Interest:

☐ Ambassador ☐ English in Texas Reviewer ☐ Literacy Education Day
☐ PD2Teach Outreach ☐ Rising Leader

The registrant acknowledges that by knowingly submitting a fraudulent P.O. number or by not following your institution's guidelines in obtaining a P.O., the registrant is liable for the full amount of the registration fee.

Submit separate forms for each registration.

Check amount can be combined for multiple registrations.

TCTELA reserves the right to cancel any person's, participation in the conference, if TCTELA determines that their presence or conduct at or before the conference is inconsistent with TCTELA's goals or values. Behavior and conversation needs to follow your business policy. Attendees are expected to act as they would in a school setting and be respectful to all.

TCTELA does not endorse nor oppose political candidates or political parties. Exhibitors, sponsors, presenters, and attendees may not endorse political candidates or parties by spoken or written display.

GRAND TOTAL \$ _____

REGISTRANT INFORMATION

Terms and Conditions: Refunds before 12/12/25 will be processed with a \$50 cancellation/name change fee. No cancellations or refunds will be provided after that date. Membership and nonmember fees are nonrefundable and non-transferable. Registrants are responsible for submitting an invoice to the institution. Registration is also available online at TCTELA.ORG. Payment is due prior to the conference.

I am registering as a:

☐ Current member ☐ Nonmember

Name: _____

Title: _____

☐ Special Dietary Needs: _____

☐ Home ☐ School Address: _____

City, State, Zip: _____

Phone: (H): _____ (W): _____

District/Company: _____

School: _____

E-mail: (H): _____ (W): _____

Email address must be unique for each registration form.

All confirmation information will arrive by email.

Select your section:

☐ Elementary-Level Section ☐ Middle School-Level Section

☐ High School-Level Section ☐ Teacher Development

☐ Please check if you require specific aids or services under the Americans with Disabilities Act in order to participate in this conference.

PAYMENT INFORMATION

☐ Credit Card ☐ Personal Check ☐ Company Check ☐ P.O. Number

Credit Card Info: ☐ MasterCard ☐ VISA ☐ Discover

Account Number: _____

Exp. Date: _____ CSV Code: _____

Cardholder Name (print): _____

Cardholder Address: _____

City, State, Zip: _____

Phone: _____

I authorize TCTELA to charge my credit card in the amount of

\$ _____

Authorized Signature: _____

I have enclosed a **check** or **purchase order** made payable to **TCTELA** in the amount of:

\$ _____ **Check #** _____ **P.O.#** _____

Accounting department representative responsible for payment:

Name: _____ Phone: _____

Contact email: _____

Complete form and mail with your payment/P.O. by January 15, 2026 to: TCTELA, 919 Congress Avenue, #1400, Austin, Texas 78701, or email to: info@tctela.org