



2026 AACRAO Annual Meeting Registration Form

April 19 – April 22 • New Orleans, LA

Fax to: 202-872-8857
Mail to: AACRAO Meetings Dept.
1108 16th St. NW Suite 400
Washington, DC 20036
Questions:
call: 202-293-9161
email: meetings@aacrao.org

First Name: _____ Last Name: _____ Badge Name: _____

Title: _____ E-mail: _____

Institution/Company: _____ *Telephone: _____ *Fax: _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____ Country: _____

Emergency Contact: _____ Phone: _____ Alt Phone: _____

*International registrants should list their country and city codes

If you would like to pay with a Credit Card, please use the [online registration form](#)

AACRAO considers anyone not affiliated with a college or university to be a Corporate Participant

2026 Annual Meeting Registration Fees:

*Affiliation with a university or college is required for a One-Day Pass

Full Conference Registration:	BEFORE January 30	ON OR AFTER January 31	ON SITE
Institutional Roster Member	\$925	\$1,110	\$1,260
Institutional Non-Roster Member	\$1,125	\$1,310	\$1,460
Minority First-Time Attendee (with approved application)	\$825	\$1,010	-
Student Member (with approved application)	\$463	\$613	\$763
One-Day Member Pass (Mon, Tues, or Wed)*	\$659	\$659	\$825
One-Day Non-Roster Member Pass*	\$769	\$769	\$935
Other Attendee Types:			
Board of Directors	Inter-association Guest	Honorary Member	Program Committee
Co-Chair of Volunteers	\$0		

Pre-Conference Workshops (additional fee):

Details can be found at <https://www.aacrao.org/events-training/meetings/annual-meeting/pre-conference-workshops>

Two-Day Workshops: Saturday, April 18 & Sunday, April 19		Price (Member/Non-Member)
Registrar 101/ FERPA	Sat 9:00AM-4:00PM Sun 8:00AM-3:00PM	\$549 / \$649
Reg 201: Strategic Work and Leadership as a Registrar	Sat 9:00AM-4:00PM Sun 8:00AM-3:00PM	\$549 / \$649
International Institute	Sat 9:00AM-4:00PM Sun 8:00AM-3:00PM	\$995 (All Attendees)
One-Day Workshops: Saturday, April 18 & Sunday, April 19		
Negotiated Rulemaking & Financial Aid* <small>*Must be registered for the full conference</small>	Sat 9:00AM-4:00PM	\$0
Medical and Health Professions Institutions	Sat 9:00AM-4:00PM	\$329 / \$429
The SEM Institute: Advancing Learner Success and Institutional Health	Sun 8:00AM-3:00PM	\$329 / \$429
Half-Day Workshops: Sunday, April 19		
State & Regional Conference Planning and Beyond: A Hands-On Discussion	Sun 8:00 AM-11:00 AM	\$0
Innovative Retention Strategies: Institutional Growth, Degree Attainment Equity & Enhanced Revenue Streams	Sun 8:00 AM-11:00 AM	\$219 / \$319
Leadership Learning Circles: A Practical Method for Connection and Growth	Sun 12:00 PM-3:00 PM	\$219 / \$319
You're Ready to Develop or Implement Innovative Digital Credentials, but Where to Begin?	Sun 12:00 PM-3:00 PM	\$219 / \$319
Post Conference Symposium: The Future of Credential Evaluation (check this box to request an invitation)	Wed 1:30 PM-4:30 PM	\$0

Ticketed Events (available only for Full Conference registrants):

Ticketed Events:		
Experience AACRAO (for First Time Attendees)	Sun 3:15PM-4:30 PM	\$0
Graduate & Professional Schools Luncheon	Mon 12:00PM-1:20 PM	\$75 / \$95
Networking Luncheon (boxed lunch provided)	Mon 12:00PM-1:20 PM	\$55 / \$66
Global Learning Mobility Luncheon	Tues 12:00PM-1:20 PM	\$75 / \$95
International Dinner (free for attendees outside the US)* <small>*Space will be limited for US-based attendees</small>	Tues 6:30PM-9:30 PM	\$125 / \$155

Guest Passes:

Number of guests (spouses, partners, children) Access to Exhibit Hall ONLY	\$244 x #
Guest Names:	

Please read and complete the consent section on the next page. Incomplete registrations will not be accepted.

Registration forms without payment will not be processed.

My primary reason for attending the AACRAO Annual Meeting is to (check only one):

- Learn
- Network
- Deliver a presentation
- Evaluate vendor products
- Have fun

Special Interests (check all that apply):

- First Timer
- Presenter
- Exhibitor
- Sponsor

Pronoun Preference (Optional):

- He/Him/His
- She/Her/Hers
- They/Them/Theirs
- Other: _____
- Xe/Xim/Xyrs
- Ze/Hir/Hirs
- Ey/Em/Eir

Organization Type (check only one):

- Educational Institution
- Non-Profit Organization
- Government Agency
- Corporation/Consultant

Areas of Responsibility and Interest (check all that apply):

- Career Development
- Recruitment
- SEM/Enrollment
- Transfer & Articulation
- Institutional Research
- Int'l Credential Evaluation
- Other: _____
- Admissions
- Financial Aid
- Student Affairs
- Int'l Admissions
- Computer/IS
- Promoting DEI

Meeting Attendance History:

Year of First SEM Conference Attended:	
Year of First Annual Meeting Attended:	
Year of First Tech/Transfer Conf. Attended:	

Special Meal Request:

- Vegetarian
- Vegan
- Diet/Allergy

If Allergy selected, please explain:



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Consents for Annual Meeting 2026 Registration

1. FOR SPECIAL SERVICES, PLEASE ATTACH A DESCRIPTION OF ANY NEEDS THAT REQUIRE ACCOMODATION

2. INFORMATION SHARING WITH SPONSORS: AACRAO relies on support from sponsors to keep meeting costs low for attendees. We share the following information with sponsors: attendee name, title, institution, email, and institutional address. We also ask sponsors to limit solicitation emails to attendees. To read more about the AACRAO privacy policy, visit <https://www.aacrao.org/who-we-are/mission-vision-values/policies/privacy-policy>

I consent

I decline

3. RECORDING CONSENT: By participating in this event, you acknowledge that you may be photographed and filmed, and you grant AACRAO and our affiliates the right to use, publish and copyright your picture, likeness and/or name in videos and/or photos taken during this event for use by AACRAO and our affiliates throughout the world, in perpetuity, and through all media.

I consent

I decline

4. CODE OF CONDUCT AGREEMENT: All AACRAO Event Attendees are required to adhere to the AACRAO Meetings Code of Conduct. Click here to view the Code of Conduct: https://www.aacrao.org/docs/default-source/meeting/annual-meeting/2023-annual-meeting/aacrao-code-of-conduct-for-conferences-events-meetings.pdf?sfvrsn=b514defc_1/

I acknowledge

Payment Information: Tax ID 52-2274900 *Credit Card accepted through online registration only

Check #: _____ Name on Check: _____

Registration Fee _____ + Workshop Fee _____ = Total Enclosed _____

Office Use Only

Date Received: _____ Check Amount: _____ Check #: _____