



45th Annual Pump Up Primary Conference

On Demand for 90 Days Beginning March 30, 2026



Virtual Attendee Registration

The deadline to register is March 25, 2026. Changes to how you are attending (in-person or virtual) will only be accepted through February 2, 2026. This form is for those attending virtually. On-demand access is available for 90 days, beginning on March 30, 2026. If you want to attend in-person, complete the in-person registration form.

Cancellation Policy: A full refund less a \$25.00 processing fee will be provided for any cancellation request received prior to March 9, 2026. No refunds will be provided after that date. Substitutions will not be allowed after that date. All cancellation requests must be submitted in writing via email to Meg at mdrhoa1@ilstu.edu. A confirmation email will be sent to the participant after registration and payment are received.

First Name _____ Last Name _____
 School Name _____
 School Address _____
 City _____
 State _____ Zip Code _____ County _____
 IL ASCD # _____ IEIN # _____
 Email _____ School Fax _____
 School Phone _____ Cell Phone _____
 Special Accommodations _____

What kind of credit for attendance do you want?

- ISBE Professional Development Hours Gateway Credits General Attendance Certificate* I do not need credit

* For participants outside of Illinois or those without an Illinois teaching license.

Administrator - Buy 4, get 1 free. Yes, this applies.

Registration Fees (Per Person)

	IL ASCD Member	Non-Member	Group of 3+ (Per Registrant)	Undergrad Student	Total
Virtual Attendance	\$199	\$248*	\$225	\$79	\$
IL ASCD Annual Membership		\$49			\$
Total					\$

On-Demand Access

Please view the online 2026 Pump Up Primary program book for information regarding sessions. The virtual viewing will be available on-demand starting on March 30, 2026.

* Non-member fees include a 1-year membership.

Payment Information

Payment or PO MUST accompany registration.

Check (payable to Illinois State University) PO# _____

Mastercard Visa Discover American Express

Card # _____

Exp Month/Year _____ CVV _____

Name on Card _____ Signature _____

Mail to:

Illinois State University
 Conference Services
 Campus Box 8610
 Normal, IL 61790-8610

Contact Information

Phone: 309.438.2160
 Fax: 309.438.5364
 Email: mdrhoa1@ilstu.edu