



95th Annual Conference and Exhibitor Showcase

January 24-27, 2027 | Hilton Universal

Check the type of registration
you are applying for

Early Bird Registration
(available until Dec. 19)

Regular Registration
(Dec. 19 - Jan 16)

Onsite Registration
(available onsite only)

☐	Full Registration	\$499	\$525	\$550
☐	Full Registration - non members	\$895	\$925	\$955
☐	Full Registration without closing event ticket	\$450	\$475	\$500
☐	Non Member no closing event ticket	\$775	\$850	\$875
Technician/Student/CDPH:				
☐	Non Member Tech (no evening event)	\$375	\$400	\$425
☐	Both Days - Tech/Student/CDPH (no evening event)	\$300	\$325	\$350
☐	Monday only - Tech/Students/CDPH	\$250	\$275	\$300
☐	Tuesday only - Tech/Students/CDPH (no evening event)	\$225	\$250	\$275
Additional Registrations				
☐	Guest all days and evening event (includes both lunches)	\$350	\$395	\$425
☐	Guest all days no evening event (includes both lunches)	\$275	\$325	\$350
☐	Honorary Members Sunday and Monday (no evening event)	\$275	\$325	\$350
☐	Honorary Members Tuesday only (includes Tuesday evening event)	\$250	\$295	\$325
☐	Tuesday evening event only	\$100	\$125	\$150



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Optional Items:

Check the type of registration you are applying for		Early Bird Registration (available until Dec. 19)	Regular Registration (Dec. 19 - Jan 16)	Onsite Registration (available onsite only)
☐	Trustee Training *Please note, the trustee session is in addition to the regular registration fees. Trustees MUST be registered for the conference, with the trustee session additional if they choose to attend.	\$135	\$165	\$185
☐	Outrunning Mosquitoes 5K	\$35	\$45	\$55
☐	Munzy Golf Tournament	\$125	\$135	No onsite allowed
☐	OR Foursome (MVCAC will reach out for names)	\$500	\$540	
☐	Wednesday Workshop: 3D printing	\$25 (limited to first 30 people)		
Total				

Name: _____

Email: _____ District: _____

Title: _____

Guest Name (if applicable): _____

Please list if you have any food allergies:

If you require reasonable accommodations to participate in this event, please let the MVCAC office know.



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Payment Information

Payment must accompany registration form for processing.

Payment enclosed in the amount of \$ _____

Payment Options

Check # _____ ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover

Name on Card: _____

Card Number: _____ Exp: _____ Security Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Authorized Signature: _____

Refund Policy

MVCAC will retain a \$25 processing fee for any cancellations. For those received after 5 p.m., January 10, 2026, no refunds will be considered.

Required Opt Out information per State of California

1. I understand that by participating in this MVCAC event I consent to sharing my data and contact information with MVCAC event partners. These partners may include exhibitors of companies that are supporting our event. If you do not want to consent to sharing your information, please check/click opt-out. ☐ I understand ☐ OPT-OUT
2. I understand that by participating in this MVCAC event I consent to sharing my information with MVCAC so I may continue to receive event marketing information. ☐ I understand ☐ OPT-OUT
3. I understand that by participating in this MVCAC event, I consent to sharing my information for future event marketing promoted by MVCAC. ☐ I understand ☐ OPT-OUT