



MAY 13 PROFESSIONAL PRECONFERENCE
MAY 14 - 15, 2026 | HOLIDAY INN STEVENS POINT

Professional Preconference and Conference Registration

(If you are requesting funds from CLTS, IRIS or Family Care, do not register with this form.)

First Name _____ Last Name _____

Email*(required) _____ Cell Phone (optional) _____

*The conference will use the Whova App for communications. The email you provide will be listed in Whova and each person who wants to use Whova App needs their own email address.

Address _____ City _____ State _____ Zip _____

County _____ Have you attended this conference before? _____ Yes _____ No _____

I am registering for:

- May 13 Professionals Pre-Conference
- May 13 Professionals Pre-Conference *and* May 14 -15 Conference
- May 14 – 15 Conference (Families and Professionals)

Special Accommodations Needed (e.g., Spanish or ASL interpreters):

**Reasonable Accommodations will be provided at no cost. Requests must be made when registering for the conference.

Are you registering as a **Professional** or a **Parent/Family Member**?

For Professionals:

Your Agency/Organization Name: _____

Your Role at that Agency: (ex. SSC, case manager, supervisor): _____

For Parents/Families:

If you plan to request that the Children's Long-Term Support (CLTS) Program, IRIS Program or Family Care Program cover conference registration, please **DO NOT use this form**. See familyvoiceswi.org/circles-of-life-conference/ for instructions or email beth@fvoftwi.org or call **608.512.0217**.

Professionals:

If you register for May 13 only, you do **not** need to select meals or sessions.

MEAL SELECTION FOR THOSE ATTENDING THE **MAY 14-15 CONFERENCE**

Circle all meals each person will be attending.

Adult/Parent	Name	\$225	Thurs. breakfast, lunch, dinner, Friday breakfast
Adult/Parent	Name	\$225	Thurs. breakfast, lunch, dinner, Friday breakfast
Child Attending Gathering of Youth	Name	\$225	Thurs. breakfast, lunch, dinner, Friday breakfast
Child 1	Name	\$150	Thurs. breakfast, lunch, dinner, Friday breakfast
Child 2	Name	\$150	Thurs. breakfast, lunch, dinner, Friday breakfast
Child 3	Name	\$150	Thurs. breakfast, lunch, dinner, Friday breakfast
Professional		\$350/\$400* *if attending May 13,14,15	Thurs. breakfast, lunch, dinner, Friday breakfast
Caregiver attending only to support children with disabilities (1 per family)	Name	\$150	Thurs. breakfast, lunch, dinner, Friday breakfast
Total Amount Due			

*Children attending **Gathering of Youth** (youth ages 10 -18 with disabilities) and **Sibshop** (brothers/sisters of those with disabilities ages 8-12 and 13- 17):

Child #1 attending **Gathering of Youth** (age 10-18 with a disability):Name: _____ Age: _____

Child #2 attending **Gathering of Youth** (age 10-18 with a disability):Name: _____ Age: _____

Child attending **Kid Sibshop (age 8-12)** :Name: _____ Age: _____

Child attending **Teen Sibshop (age 13-17)**: Name: _____ Age: _____

***Youth programs require additional registration, found on the confirmation email.**

Adults and professionals attending the conference, please indicate which sessions you would like to attend.
See for descriptions. Circle "No" if you are not planning to attend a session during the times indicated below.

Session "A" Thursday, May 14, 10:30 -11:45 1 2 3 4 5 6 7 No A Session

Session "B" Thursday, May 14, 1:15-2:30 8 9 10 11 12 13 No B Session

Session "C" Thursday, May 14, 3:00-4:15 14 15 16 17 18 19 20 (2-hrs) No C Session

Session "D" Friday, May 15, 9-10:15 21 22 23 24 25 No D Session

Session "E" Friday, May 15, 10:30-11:45 26 27 28 29 30 No E Session

Cancellations/Substitutions/No Shows:

Refunds requested before April 15, 2026, will be assessed as a \$25 processing fee. Please send your request to:

uwpce-conf@uwsp.edu. No refunds will be given after **April 15, 2026**.

Substitutions can be made at any time, but no shows will be responsible for the full conference fee. Last-minute registrations are not guaranteed for meals or materials.

Canceling your hotel room does not cancel your conference registration. You will need to contact UWSP Continuing Education at the above address to make the cancellation.