

2023 School Operations Conference - Corpus Christi

The TASBO School Operations Conference will bring practical strategies and best practices to improve your district's Maintenance, Operations, Transportation, Safety and Risk Management departments. Join us for an event that is specifically designed for you – the school facilities and operations professional. Don't miss this opportunity to network with your peers and vendors! **CEU 9/CPE 10.5**

Thursday and Friday, October 19 and 20, 2023

Day 1: 8:30 AM – 4:45 PM | Day 2: 8:00 AM – 12:00 PM

American Bank Center

1901 N Shoreline Blvd | Corpus Christi, TX 78401

\$335 Member | \$385 Non-Member | Associate Member: \$600 | Associate Non-Member: \$750

BOOK YOUR HOTEL: TASBO has reserved rooms at the Omni Hotel located at 900 N. Shoreline Blvd. Call 1-800-THE-OMNI and request the TASBO single occupancy rate of \$159 or [book online here](#). **Block closes September 26 or when sold out. The hotel offers overnight guests discounted self-parking at \$20 total (typically \$20/night).**

About TASBO Events: No printed handouts will be provided and you are encouraged to BYOD - Bring Your Own Device. No prerequisites required to register. If you or (someone attending with you) need ADA assistance to participate, please call us at 512-628-1282.

Cancellation Policy: Cancellations are only accepted in writing. Cancellations received seven (7) working days before the event are cancelled in full, those received one (1) to six (6) working days before the event are cancelled at 50 percent, and cancellations are not accepted the day of or after the event. If you do not cancel and/or do not attend, you are still responsible for payment. If TASBO cancels an event, you will be refunded in full.

Register online at [TASBO.org](https://tasbo.org) or return completed form by:

Mail: 5920 W. William Cannon, Building 1,
Suite 200, Austin, TX 78749

Email (DO NOT email CC info): register@tasbo.org

Name: _____	Title: _____
District/Employer (do not abbreviate): _____	
Contact Phone: _____	Email: _____
Full Mailing Address: _____	
Payment Method: <input type="checkbox"/> PO _____ <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Credit Card	
Cardholder Name: _____	Daytime Phone: _____
Card Number: _____	EXP (MM/YY): _____
Billing Address: _____	
Cardholder Signature: _____	