

BakingTECH 2026

February 16 - 19

Sheraton Grand Chicago Riverwalk Chicago, Illinois

Please print or type. Information for Group Registration is on the backside.

Personal Information	on			
□ ASB Membership # _		1 Non-Member		
Last Name	t Name First Name			
Company/Organizatio	n			
Street Address				
City	State/Province	Zip/Postal Code		
Telephone				
E-mail				
Spouse/Guest Name, i	f registering			
☐ New address. Please o	hange my ASB mailing info	rmation.		
Birthdate (month/day/yea	ar, 01/01/1980):			
*Required for Young Professional Membe	r Discount of \$50			
Privacy Policy Your data privacy and security a accordance with our legitimate tion. Please review our privacy p	an ambassador to a new me	er for this event, ASB will process your data in nt and for being a community-based organiza		
electronic and other media, incl you may have related to the use inspect or approve the photo, vi right of publicity, defamation, ar	uding the ASB website. By attending of recorded media of you at the eve deo or audio recording of you, any c	SB news and promotional material, in print the event, you waive and release any claims tr, including, without limitation, any right to laims for invasion of privacy, violation of the fees for use of such recorded media.		

I confirm that I agree to this statement.

Code of Conduct

Code of Conduct

We value the participation of each member of the community and endeavor to deliver an enjoyable and fulfilling experience. Conference participants are expected to conduct themselves with integrity, courtesy and respect for others and maintain the highest level of professionalism at all conference programs and events, whether officially sponsored by ASB or not. All attendees, speakers, organizers, volunteers, guests, partners, wend ors and staff at any ASB event are required to observe the following Code of Conduct. ASB is dedicated to providing a harassment-free conference experience for everyone, regardless of gender, sexual orientation, disability, physical appearance, body size, race or religion. We do not tolerate harassment of conference participants in any form. All communication should be appropriate for a professional audience including people of diverse backgrounds and cultures. Sexual language and imagery are not appropriate for the conference. Be kind to others. Do not insult or defame participants. Harassment in any form, sexist, racist, or exclusionary, jokes are not condoned at ASB Events. Participants violating these rules may be asked to leave the conference and all related events at the sole discretion of ASB and may be restricted from attending future ASB events.

 $\hfill \square$ I confirm that I agree to this statement.

Sponsor Opt-InI agree that ASB may share my contact detail, along with other personal data that I provide in this registration form [and in pre-event surveys] with event sponsors, as listed in the Sponsors' section of the event website, for the purposes of post-event follow-up communication. This consent is granted for one-off communication. tion from each Sponsor.

> ☐ Lagree ☐ I do not agree

Sponsor Opt-In Liability Waiver & Be Well Agreement

Thereby release, waive and forever discharge any and all liability, claims, and demands of whatever kind or nature against the ASB and its affiliated partners and sponsors, including in each case, without limitation, their directors, officers, employees, volunteers, and agents (the "Released Parties"), either in law or in equity, to the fullest extent permissible by law, including but not limited to damages or losses caused by the negligence, fault or conduct of any kind on the part of the Released Parties, including but not limited to death, bodily injury, illness, economic loss or out of pocket expenses, or loss or damage to property, which I, my heirs, assignees, next of kin and/or legally appointed or designated representatives, may have or which may hereinafter accrue on my behalf, which arise or may hereafter arise from my participation in the event. I hereby knowingly assume the risk of injury, harm and loss associated with my participation in the event, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.

 \square I confirm that I agree to this statement.

Registration Changes & Cancellation Policy
Conference cancellations must be submitted to ASB in writing via email at events@asbe.org or mail. All refunds assessed a \$150 processing fee. Once ASB has received your written cancellation, all credit card refunds will be processed promptly. For check refunds, please allow 2 – 4 weeks after the meeting has ended. Refunds will not be granted after **January 9, 2026** nor will they be given for no-shows or Society membership fees.

Early Registration Deadline: November 14, 2025

Register online at www.ASBE.org

Online & advance registration will close February 16, 2024. All registration fees will increase by \$150 after 11/14/2025.

Membership Information

Join ASB now and pay the member registration rate!

Member Type	Rate
☐ JOIN or RENEW Professional Membership	\$325
☐ JOIN or RENEW Young Professional Membership	\$275
☐ JOIN or RENEW Student Membership	\$25
Membership Subtotal	\$

Conference Registration

Note: your ASB membership must be current at the time of registration to qualify for ASB Member Rates. **Renew or** Join in the memberhsip section above

does not include t	he spouse event
Before 11/14	After 11/14
\$750	\$900
\$900	\$1,050
\$1,100	\$1,250
\$1	25
\$1	60
\$1,615	\$1,765
\$3	00
Member	NonMem- ber
□ \$100	1 \$150
□ \$100	\$ 150
oup dinners	on Tues. 2/17
	Before 11/14 \$750 \$900 \$1,100 \$1 \$1 \$1 \$1,615 \$3 Member □ \$100 □ \$100

Method of Payment ☐ Check or money order enclosed, payable ☐ Visa ☐ MasterCard ☐ American						
Card Number	CVC#	Expiration Date				
CC Card Billing Address (If different from registrant information)						
City, State, Zip Code (If different from registrant information)						
Cardholders Name						

Conference Registration Subtotal + \$

TOTAL ENCLOSED OR CHARGED U.S. \$

Membership Subtotal = \$

Cardholders Signature

Return to: American Society of Baking

1415 Shelby Street, Suite A Indianapolis, IN 46203 [']Phone (800) 713-0462 🌑 Fax (888) 315-2612

