



Participant Registration Form

This form is for use by ProCon participants:

- Who will be paying the registration fee as part of completing this form, or
- Whose center/camp already submitted payment on their behalf and who subsequently received an email from JCC Association indicating that payment was received.

If your center/camp is paying your registration fee and you did not yet receive an emailing indicating payment was made, please direct the person responsible for submitting payment to [this payment form](#).

A preview of the questions in this Participant Registration Form can be found [here](#).

Visit the [ProCon 2025 page](#) for more details.

For questions, please contact procon@jcca.org.

SAVE AND RETURN LATER

Will you complete this form and submit it now, or might you wish to pause, save what's you've already completed, and come back later to complete and submit the form?

I wish to *

☒ Complete and submit this form now

☐ Use the "Save and Return" feature in case I want to come back later to complete and submit

Save and Return Later

Use this "Save and Return Later" feature to pause filling out this form, save your information and come back later.

Log in

REGISTRATION TYPE

I am registering as a: *

☐ C Professional (including JCC
Global)

☐ Presenter

☐ Guest

REGISTERING ON BEHALF OF SOMEONE?

Who is registering? *

☐ I am registering for
myself.

☐ I am registering on behalf of someone
else.

☐ I am registering as part of a substitution (i.e. I am replacing someone who registered
previously)

For information about substitutions, please visit the [Register](#) page on the ProCon website.

MY INFORMATION (The person completing this form, not the ProCon participant)

First Name *

Last Name *

Email Address *

Cell Phone Number *

PARTICIPANT INFORMATION

Please provide your first and last name, as you want it to appear on your ProCon name tag and on ProCon participant rosters.

First Name *

Last Name *

Email Address *

Cell Phone Number *

Your center/camp

The dropdown list is organized alphabetically by state/province then by city or camp
name. *

What is the name of your organization, company or

affiliation? *

Job Title *

If you are an ordained rabbi, an invested cantor and/or have been awarded a doctoral degree resulting in your use of "Dr." before your name, please check the appropriate boxes below. If you use another honorific, please check other and list it. Otherwise, please skip to the next question.

Honorific:

☐ Cantor

☐ Dr

☐ Rabbi

☐ Other

Do you want your honorific to appear on your name badge, if possible? *

☐ Yes

☐ No

PRESENTER-SPECIFIC INFORMATION

PRESENTER BIO

Using the text box, please enter your bio. This will appear, along with your headshot, on a page with all presenters and with your session(s). Please adhere to the following guidelines:

- Your bio should not exceed 150 words and should be written in the third person.
- Do not include links, including a link to an existing online bio in lieu of a 150-word bio.
- Do not use "Dr." as part of presenter name, should follow this format: [FIRST NAME] [LAST NAME], [DEGREE, i.e., Ph.D., M.D., Ed.D., etc.].
- Per AP Style, do not capitalize job titles unless they precede the name.
- After first reference, use last name only.

*

0/150 words

PRESENTER HEADSHOT

Using the file upload option below, please browse your computer, or drag and drop your headshot. This photo should adhere to the following guidelines:

- Photos should be submitted in JPG or PNG format
- Photos should be close-up headshots that include full head and shoulders, similar to a passport photo.
- Please do not submit photos that have a busy background or are blurry.

*

Choose File

No file selected

ARRIVAL AND DEPARTURE

For ProCon 2025, are you travelling to Minneapolis? *

☒ Yes, and I know my arrival and departure dates

☐ Yes, but I do NOT yet know my arrival and departure dates

☐ No, I live in or near Minneapolis

Arriving *

mm/dd/yyyy



Departing *

mm/dd/yyyy



Has JCC Association agreed to book and pay for your hotel? *

☒ Yes

☐ No

What will your hotel arrangements be? *

☐ Will be sharing a room at the ProCon hotel.

☐ Will be at the ProCon hotel but will NOT be sharing a room.

☐ Am local to Minneapolis or, for any other reasons, am not using the ProCon hotel.

☐ Don't know yet.

Please provide the full name of who you are sharing a room with. If you do not know yet who you will be rooming with, please put "N/A."

First Name

Last Name

Are you interested in being included on a list of people open to sharing a taxi/Uber/Lyft from/to the airport? *

☒ Yes

☐ No

☐ Unsure

EMERGENCY CONTACT

Please provide information for an emergency contact:

First Name *

Last Name *

Cell Phone Number *

Relationship *

REQUESTS AND PREFERENCES

PREFERRED GENDER PRONOUNS

Participants' preferred pronouns may appear on their name badge and in attendee rosters. What is your preference? *

☐ She/Her

☐ He/Him

☐ They/Them

☐ Please do not include pronouns on my badge or on rosters

☐ Other

ACCOMMODATIONS

Our event space will be ADA compliant, and JCC Association is committed to making events as accessible as possible.

Are there any accommodations or services we can provide to support participation, and we will do our best to provide?

DIETARY

Let's talk food. Do you have any dietary needs, allergies, or preferences we should know about to keep you happy and healthy? Note that food served as part of ProCon is kosher, under the supervision of [Minnesota Kosher](#).

(Check all that apply – we've got you!)*

☐ vegetarian

☐ vegan

☐ Gluten and I don't get along

☐ Dairy-free, please

☐ Have a nut allergy (I'll give details below)

☐ Other allergy or sensitivity (I'll explain below)

☐ Avoid red meat

☐ Eat everything! Bring it on.

☐ Other

Please describe your **nut allergy**. *

Please describe your **your allergy and/or sensitivity**. *

Tell us anything else you'd like us to know about your dietary needs/preferences.

MINYAN

Do you anticipate the need for a minyan during ProCon - to say kaddish or for other reasons?

FYI, a minyan is a group of minimum ten people who gather for public prayer and certain religious obligations, fostering community and the sanctity of communal rituals. Kaddish is a prayer recited in memory of the deceased. Some observe the tradition of reciting Kaddish for the first seven and/or up to 30 days following a loss and some the tradition of recitation for 11 months following. Many also say Kaddish on the Yahrtzeit (anniversary) of a loved one's passing. *

☐ Yes, I anticipate the need for a minyan

☐ No, I do not anticipate the need

Might you be willing to participate in a minyan during ProCon? *

☐ Yes

☐ Perhaps

☐ No

☐ Unsure at this time

Save Progress

Next >>

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