

International Meeting of the Psychometric Society - REGISTRATION FORM

IMPS 2026 • July 21 - 24, 2026 • Seoul, Republic of Korea

Please complete this registration form. One form must be filled out for each registrant and payment must accompany the registration form. Registration by telephone will not be accepted. **Registration for speakers and poster presenters is required by May 4, 2026.** Register by May 22, 2026 to take advantage of Early Registration Discounts. Additional fees will apply for late and onsite registration.

Registration Information

First Name: _____

Last Name: _____

Affiliation(s): _____

Mailing Address: _____

Mailing Address (cont.): _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

Is this address: Work Home

Daytime Phone: _____

Mobile: _____

E-Mail Address: _____

How did you learn about this conference?

I am a Psychometric Society Member Colleague or Friend

I am a Previous Attendee The Psychometric Society Website

Other _____

Special Dietary Needs: Please note any attendee dietary restrictions: _____

Photo Release: The Psychometric Society captures photographs and video during the meeting for future marketing purposes in print and electronically.

Please indicate your consent below:

Yes, I acknowledge that the Psychometric Society may take photos at the International Meeting for marketing purposes in print and electronically.

No, I would like to opt out of any potential photo opportunities during IMPS 2026.

Badge Information

This is how your badge will read. Please print clearly and complete only those lines that are different from the "Registration Information" above.

First Name or Nickname: _____

Full Name: _____

Affiliation: _____

City: _____

State/Province: (if applicable) _____

Country: _____

Emergency Contact Information

Please provide the following information in case of emergency:

Emergency Contact Name: _____

Mobile Phone: (_____) _____

Email: _____

Support-a-Student

Contribution to support a Student Travel Award (optional)

\$5 \$10 \$25 \$50 \$100 \$250 Other: _____

Registration Notice

All prices are in US dollars (USD). Registration fees include admission to all sessions; meeting program at a glance; meeting smart phone app; morning and afternoon refreshments; welcome poster reception; and the optional Closing Reception Excursion. **Presenters must be registered by May 4, 2026, or your presentation will be removed from the program.**

Guest Information

Guest Registration: If you are bringing a guest to IMPS 2026, a guest registration will include access to the Welcome Poster Reception and the Closing Reception. A guest registration ticket does not include admission to meeting sessions. Guest tickets are also available to attend the Closing Reception only.

None Guest Registration: \$150* Guest Closing Banquet Only: \$100**

How many guests? _____

Guest Name(s): _____

Guest Special Dietary Needs: Please note any guest dietary restrictions: _____

* Includes admission to the Welcome Poster Reception (July 21, 2026) and the Closing Reception (July 24, 2026).

** Includes admission to the Closing Banquet (July 24, 2026).

Pre-Conference Short Course Fees - July 20, 2026

Sold separately.

Short Course #1: Introduction to AI-based Automated Item Generation and Automated Scoring
Full Day (9:00 a.m. - 5:00 p.m.)

Short Course #2: Psychometric Network Modeling
Full Day (9:00 a.m. - 5:00 p.m.)

Short Course #3: Data-driven learning of latent structures in CDMs
Half Day (9:00 a.m. - 12:30 p.m.)

Short Course #4: Analyzing Item Response Data Using a Latent Space Modeling Approach in R
Half Day (2:00 p.m. - 5:30 p.m.)

FULL DAY SHORT COURSE FEES

| | <u>With Conference Registration</u> | <u>Short Course Only</u> |
|-------------------------|-------------------------------------|--------------------------------|
| Regular Member | <input type="checkbox"/> \$150 | <input type="checkbox"/> \$250 |
| Non-Member | <input type="checkbox"/> \$180 | <input type="checkbox"/> \$300 |
| Student | <input type="checkbox"/> \$75 | <input type="checkbox"/> \$125 |
| Retired Member | <input type="checkbox"/> \$75 | <input type="checkbox"/> \$125 |
| Developing Countries*** | <input type="checkbox"/> \$75 | <input type="checkbox"/> \$75 |

HALF DAY SHORT COURSE FEES

| | <u>With Conference Registration</u> | <u>Short Course Only</u> |
|-------------------------|-------------------------------------|--------------------------------|
| Regular Member | <input type="checkbox"/> \$75 | <input type="checkbox"/> \$125 |
| Non-Member | <input type="checkbox"/> \$90 | <input type="checkbox"/> \$150 |
| Student | <input type="checkbox"/> \$35 | <input type="checkbox"/> \$60 |
| Retired Member | <input type="checkbox"/> \$35 | <input type="checkbox"/> \$60 |
| Developing Countries*** | <input type="checkbox"/> \$35 | <input type="checkbox"/> \$35 |

Meeting Registration Fees

| | On or Before 5/22/26 | After 5/22/26 |
|-------------------------|--------------------------------|--------------------------------|
| Regular Member | <input type="checkbox"/> \$515 | <input type="checkbox"/> \$640 |
| Non-Member | <input type="checkbox"/> \$675 | <input type="checkbox"/> \$800 |
| Student | <input type="checkbox"/> \$250 | <input type="checkbox"/> \$375 |
| Retired Member | <input type="checkbox"/> \$250 | <input type="checkbox"/> \$375 |
| Developing Countries*** | <input type="checkbox"/> \$250 | <input type="checkbox"/> \$250 |

Developing Countries***

The Psychometric Society will offer a discounted registration fee to a member/non-member from a developing country. A list of developing countries that are eligible for the reduced rates are available [here](#).

IMPS 2026 Mentorship Program

Please indicate below if you would like to participate in the IMPS 2026 Mentorship Program.

- Yes, I would like to be Mentor for a graduate student at the IMPS 2026.
 Yes, I am a graduate student who would like to be assigned a Mentor at the IMPS 2026.

Cancellation Policy & Fees

*A \$100 processing fee will be applied if you cancel *conference registration* on or before May 31, 2026 (midnight PST). (No refunds will be given after May 31.)

**A \$50 processing fee will be applied if you cancel your *short-course-only registration* on or before May 31, 2026 (midnight PST). (No refunds will be given after May 31.)

Closing Banquet

Friday, July 24, 2026, 6:00 p.m. to 9:00 p.m.

We are excited to host the IMPS Closing Conference Banquet event at the beautiful Alumni Center at the Yonsei University on Friday, July 24, from 6:00 p.m. to 9:00 p.m., following the final day of conference sessions. Plan to enjoy an evening of authentic taste of Seoul where attendees can experience a communal feast together.

Conveniently located on Campus, the banquet evening will feature a traditional Korean meal with tea and optional libations to experience the true warmth and hospitality of Korea which provides the perfect memory concluding the meeting of the Psychometric Society.

You are welcome to bring a guest or guests to the banquet for an additional fee. Please be sure to arrange this ahead of time to ensure tickets are reserved.

Help us make this evening memorable for you:

I will be attending the Closing Banquet:

- Yes
 No
 My guest(s) will be attending the Closing Banquet.

Number of Guests: _____

Code of Conduct

As part of the registration process for IMPS 2026, all participants are required to agree to abide by the Psychometric Society [Code of Conduct](#).

- I agree to abide by the Code of Conduct.

Fees

| | |
|--------------------------------------|---------------------|
| IMPS 2026 Registration Fee | \$ _____ USD |
| Pre-Conference Short Course Fee | \$ _____ USD |
| Conference Guest(s) Registration | \$ _____ USD |
| Guest Closing Banquet Only Ticket(s) | \$ _____ USD |
| Support-a-Student Donation | \$ _____ USD |
| Total Enclosed: | \$ _____ USD |

(Please submit this total amount with your registration form.)

Payment

Check a payment method and enclose your payment for registration fees, as well as any optional events in which you wish to participate.

- Check (made payable in U.S. funds, drawn on a U.S. bank to Psychometric Society)
 MasterCard Visa American Express Discover

Card Number: _____

Exp. Date: _____

CVV: _____

Billing Address: _____

Billing City: _____ Billing State: _____

Billing Zip or Postal Code: _____

Signature: _____

Print Name: _____

Mail or scan this registration form and fees to:

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E: info@psychometricsociety.org · W: www.psychometricsociety.org

