

TAX PRACTITIONER WORKSHOPS REGISTRATION FORM

Separate form needed for each registrant. You may reproduce form.

NAME

DAYTIME PHONE

FIRM

PTIN (all 8 digits required for IRS CE)

ADDRESS

E-MAIL

CITY STATE ZIP

Yes, please report hours to IRS. Credit hours will not be reported unless box is checked.

Please check if first time attendee

PROFESSION (REQUIRED) check the appropriate box:

CPA EA/ERPA Attorney PTIN/AFSP

Other _____

Workshop	Workshop #	Date	Location	Amount
General				
Advanced				
Fiduciary				
S Corporation				
Texas State Tax				
Ethics for TX CPAs				
Agricultural Tax				
			TOTAL*	

If paying by credit card, you can register online at www.taxworkshop.com.

Enclosed is my check (payable to TX Ext. Educ. Fdn. Inc.)

VISA MC Discover Am Ex

Card # _____ Expiration (MMYY) _____

Signature _____ CVV # _____

NAME ON CREDIT CARD _____

BILLING ADDRESS OF CREDIT CARD _____

CITY STATE ZIP

Mail to:
TX Ext. Educ. Fdn., Inc.
PO Box 946
College Station, TX 77841-0946

Fax credit card payment to:
(979) 691-0654

Fill in the workshop number, date, location, and amount for each workshop you are registering for. To order materials; or materials and exam, fill in the order number and amount (prices vary – please check listing for correct amount).

***Your registration, with full payment *MUST REACH OUR OFFICE 5 BUSINESS DAYS PRIOR TO THE WORKSHOP YOU WISH TO ATTEND.* Limited late registration is available at the door before the workshop begins for an additional fee of \$35.00 per workshop. Please register at the door if the form will not reach our office 5 business days prior to the start of the workshop.**

Check out our website at www.taxworkshop.com Texas Extension Education Foundation, Inc.