

How to Register: PRAGUE, CZECH REPUBLIC

CALL 888-515-3674 (Extension 1), fax to 888-552-9749 (or email conferences@nticpe.com) and register by credit or debit card (MC/VISA) or check. Please return this form to the address at the bottom of the page.

REGISTRATION FORM

First and last name _____ Spouse/companion's name(s) _____

Address _____

City/Town _____ State _____ Zip Code _____

Telephone _____ Facsimile _____ Email address _____

CONFERENCE INFORMATION

Check one:		By May 31, 2019	After May 31, 2019	Cost includes all materials
_____ 40 CPEs		\$1,799	\$1,899	Conference fees include \$100 Prague conference surcharge.
_____ 32 CPEs		\$1,748	\$1,848	
_____ 24 CPEs		\$1,697	\$1,797	

Days you are attending: (check all that apply):

Please check	Date	Topic
_____	08-06-19	2019 Estate, Gift, Benefits and Retirement Planning Update-Part 1 (6 CPEs-Group Live-Taxes)
_____	08-07-19	Individual Tax Update After Tax Reform-2019
_____	08-09-19	2019 Estate, Gift, Benefits and Retirement Planning Update-Part 2 (6 CPEs-Group Live-Taxes)
_____	08-10-19	Business Tax Developments After Tax Reform-2019

HOTEL INFORMATION

	(Nights of August 4-10, 2019) (departure on August 11, 2019)	Please check	(8 days/7 nights) (Per Person) Double Occupancy
Please fill in	<u>Room category</u>		<u>Package Cost</u>
	Run of House King	_____	\$2,355
	Deluxe King	_____	\$2,555
	Renaissance King	_____	\$3,005
Arrival date: _____	<p>NOTE: Participants must purchase the hotel package to attend the conference.</p> <p>Cost of extra nights and additional persons: Please call for details.</p> <p>Hotel package payment: \$500 per person due with this reservation: Balance due: April 1, 2019.</p>		
Departure date: _____			

REGISTRATION FORM (CONTINUED)

PAYMENT:
 Pay by check
 (mail check to address below)

 Charge my credit card:

 MC
 VISA

 Card number

 Exp date

 Code

COST:

Conference fee \$ _____

Hotel deposit # people _____ x \$500 = \$ _____

TOTAL AMOUNT \$ _____

[Balance of hotel package due April 1, 2019]

State(s) for which CPE is required: _____

 I am a (an):
 CPA Atty
 PA Other
 CFP

I work in: _____ Public accounting _____ Industry _____ Other _____

 EA (PTIN _____)

SELF-STUDY PACKET:

Participants receive 6 CPEs for attending each live session and can receive additional CPEs (equal to the number of CPEs purchased) by completing optional self-study courses. Self-study materials will be available in modules of 2 CPEs and 4 CPEs (taxation and A&A). Summary of CPEs available at this program: Live Group study= 24 CPEs; Self-Study= 16 CPEs for a total of 40 CPEs.

Please tell us how you would like to receive your self-study materials: (CHECK ONE)
 On-line access to self-study courses in a PDF format
 Mail self-study courses to you prior to the conference

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NOTE: SELF-STUDY MATERIALS WILL NOT BE DISTRIBUTED AT THE CONFERENCE.

Hotel Cancellation: Refunds for hotel cancellations will be made, less a \$100 per person administrative fee, if cancellation is made in writing **on or before April 1, 2019**. **After April 1, 2019**, no refunds for hotel cancellations. No exceptions. Any cancellations must be made in writing and emailed to conferences@nticpe.com or faxed to **888-552-9749**. No refunds for early departures.

Conference Cancellation Policy: Conference fee will be refunded in full only if notice is received in writing within 60 days prior to the first day of the conference. With respect to a cancellation occurring 60 days or less, no refund shall be granted but credit will be given toward a future conference. This policy applies to the conference fee only and not to hotel costs.

On April 1, 2019, I authorize NTI to charge my credit card noted above for the balance of the hotel package.

Signed: _____

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Please: Fax this form to 888-552-9749, or

 Email this form to: conferences@nticpe.com, or

Mail this form to: NTI Conferences, P.O. Box 375, Burlington, MA 01803

 For more information, please visit our website at: www.nticpe.com. +

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