

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:				
_____ 40 CPEs			\$1,899	Cost includes all materials Conference fees include \$100 Prague conference surcharge.
_____ 32 CPEs			\$1,848	
_____ 24 CPEs			\$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

<p>Please fill in</p> <p>Arrival date: _____</p> <p>Departure date: _____</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; text-align: center;"> (Nights of August 4-10, 2019) (departure on August 11, 2019) </td> <td style="width: 40%; text-align: center;"> (8 days/7 nights) (Per Person) Double Occupancy </td> </tr> <tr> <td style="border-top: 1px solid black; border-bottom: 1px solid black;">Room category</td> <td style="border-top: 1px solid black; border-bottom: 1px solid black; text-align: center;">Please check</td> </tr> <tr> <td>Run of House King</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Deluxe King</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Renaissance King-SOLD OUT</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="border-top: 1px solid black; border-bottom: 1px solid black;"></td> <td style="border-top: 1px solid black; border-bottom: 1px solid black; text-align: center;">Package Cost</td> </tr> <tr> <td></td> <td style="text-align: center;">\$2,355</td> </tr> <tr> <td></td> <td style="text-align: center;">\$2,555</td> </tr> <tr> <td></td> <td style="text-align: center;">\$3,005</td> </tr> </table> <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>	(Nights of August 4-10, 2019) (departure on August 11, 2019)	(8 days/7 nights) (Per Person) Double Occupancy	Room category	Please check	Run of House King	_____	Deluxe King	_____	Renaissance King-SOLD OUT	_____		Package Cost		\$2,355		\$2,555		\$3,005
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Room category	Please check																		
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	Package Cost																		
	\$2,355																		
	\$2,555																		
	\$3,005																		

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
 +

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.

REV 5-4-19

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 EMAIL: conferences@nticpe.com**