

How to Register: JACKSON HOLE, WYOMING -JULY 14-20, 2024

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 June 30, 2024	After June 30, 2024	Cost includes all materials, continental breakfast at each session, (for participants only), a cocktail reception for you and your spouse/guest.
_____ 40 CPEs		\$2,189	\$2,289	
_____ 32 CPEs		\$2,148	\$2,248	
_____ 24 CPEs		\$2,097	\$2,197	

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

Please check	Date	Topic
_____	7-15-24	2024 Individual Tax Update (6 CPEs-Group Live-Taxes)
_____	7-16-24	Business Tax Developments- 2024 (6 CPEs-Group Live-Taxes)
_____	7-18-24	Tax and Financial Planning Issues for Today's Family- 2024- Part 1 (6 CPEs-Group Live-Taxes)
_____	7-19-24	Tax and Financial Planning Issues for Today's Family- 2024- Part 2 (6 CPEs-Group Live-Taxes)

HOTEL INFORMATION

Please fill in Arrival date: _____ Departure date: _____	(Nights of July 14-19, 2024) (departure on July 20, 2024)	(7 days/6 nights) (Per Person) Double Occupancy									
Cost of extra nights and additional persons: Please call for details.	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%; padding: 5px;"><u>Room category</u></th> <th style="width: 20%; padding: 5px;"><u>Please check</u></th> <th style="width: 20%; padding: 5px;"><u>Package Cost</u></th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Premier King</td> <td style="text-align: center; padding: 5px;">_____</td> <td style="text-align: center; padding: 5px;">\$1,815</td> </tr> <tr> <td style="padding: 5px;">Premier Double Queen</td> <td style="text-align: center; padding: 5px;">_____</td> <td style="text-align: center; padding: 5px;">\$1,915</td> </tr> </tbody> </table>	<u>Room category</u>	<u>Please check</u>	<u>Package Cost</u>	Premier King	_____	\$1,815	Premier Double Queen	_____	\$1,915	
<u>Room category</u>	<u>Please check</u>	<u>Package Cost</u>									
Premier King	_____	\$1,815									
Premier Double Queen	_____	\$1,915									
<p>Note: Hotel package costs are subject to change without notice.</p> <p>Hotel package payment: \$300 per person due with this reservation: Balance due: April 1, 2024</p>											

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 \$300 = \$ _____

TOTAL AMOUNT \$ _____

[Balance of hotel package due April 1, 2024]

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

State(s) for which CPE is required: _____

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

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 downloadable PDF format
 Distribute self-study courses to you on-site at the conference

FULL REFUND OF ALL CHARGES ON OR BEFORE APRIL 1, 2024

Hotel Cancellation: Refunds for hotel cancellations will be made, **IN FULL**, if cancellation is made in writing **on or before April 1, 2024**. **No hotel refunds after April 1, 2024**. Any cancellations on or before April 1, 2024 must be made in writing and emailed to conferences@nticpe.com or faxed to [888-552-9749](tel:888-552-9749). No refunds for early departures.

Conference Cancellation Policy: Conference fee will be refunded in full if notice is received in writing **on or before April 1, 2024**. With respect to a cancellation occurring **after April 1, 2024** 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, 2024, 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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