

How to Register: FONTEVERDE, TUSCANY, ITALY - AUG 25- SEPT 1, 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 Feb 15, 2024 | By June 30, 2024 | After June 30, 2024 | Cost includes all materials Conference fees include \$200 Italy conference surcharge. |
|----------------------------------|--|--------------------|---------------------|------------------------|--|
| <input type="checkbox"/> 40 CPEs | | \$2,289 | \$2,389 | \$2,489 | |
| <input type="checkbox"/> 32 CPEs | | \$2,248 | \$2,348 | \$2,448 | |
| <input type="checkbox"/> 24 CPEs | | \$2,197 | \$2,297 | \$2,397 | |

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

| Please check | Date | Topic |
|--------------------------|----------|-------|
| <input type="checkbox"/> | 08-27-24 | TBD |
| <input type="checkbox"/> | 08-28-24 | TBD |
| <input type="checkbox"/> | 08-30-24 | TBD |
| <input type="checkbox"/> | 08-31-24 | TBD |

HOTEL INFORMATION

| | (Nights of August 25-Aug 31, 2024) (departure on Sept 1, 2024) | | (8 days/7 nights) (Per Person) Double Occupancy |
|---|---|--------------------------|--|
| Please fill in: | <u>Room category</u> | Please <u>check</u> | <u>Package Cost</u> |
| Arrival date: _____ | Superior-Inner Courtyard/Gardenview - balcony | <input type="checkbox"/> | \$2,697 |
| Departure date: _____ | Superior- Tuscany Valley View - no balcony | <input type="checkbox"/> | \$3,139 |
| Cost of extra nights and additional persons: Please call for details. | Superior- Tuscany Valley View - balcony | <input type="checkbox"/> | \$3,378 |
| Minimum stay: 6 nights. | Deluxe- Tuscany Valley View - balcony LIMITED AVAILABILITY | <input type="checkbox"/> | \$3,832 |
| <p>Note: Hotel package costs are subject to change without notice. Hotel package payment: \$750 per person due with this reservation: Balance due: March 1, 2024.</p> | | | |

REGISTRATION FORM (CONTINUED)- Italy 2024

PAYMENT:

Pay by check
(mail check to address below)

Charge my credit card:

COST:

Conference fee \$ _____

Hotel deposit # people _____ x \$750 = \$ _____

TOTAL AMOUNT \$ _____

[Balance of hotel package due March 1, 2024]

MC
 VISA

Card number

Exp date

Code

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.

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

Hotel Cancellation: Refunds for hotel cancellations will be made, **IN FULL**, if cancellation is made in writing **on or before March 1, 2024**. **No hotel refunds after March 1, 2024**. Any cancellations on or before March 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 only if notice is received in writing **on or before March 1, 2024**. With respect to a cancellation occurring **after March 1, 2024**, no refund shall be granted for the conference fee but credit will be given toward a future conference. This policy applies to the conference fee only and not to hotel costs.

On March 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.

Final 10-17-23

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