

How to Register: ROYAL HOTEL SANREMO, ITALIAN RIVIERA AUGUST 24-31, 2025

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, 2025	After June 30, 2025	Cost includes all materials Conference fees include \$200 Italy conference surcharge.
_____ 40 CPEs		\$2,599	\$2,699	
_____ 32 CPEs		\$2,498	\$2,598	
_____ 24 CPEs		\$2,397	\$2,497	

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

Please check	Date	Topic
_____	8-26-25	2025 Individual Tax Update (6 CPEs-Group Live-Taxes)
_____	8-27-25	Business Tax Developments-2025 (6 CPEs-Group Live-Taxes)
_____	8-29-25	Post-Election Estate, Gift, and Retire Planning- 2025- Part 1 (6 CPEs-Group Live-Taxes)
_____	8-30-25	Post-Election Estate, Gift, and Retire Planning- 2025- Part 2 (6 CPEs-Group Live-Taxes)

HOTEL INFORMATION

Please fill in:	(Nights of August 24-30, 2025) (departure on August 31, 2025)	Please check	(8 days/7 nights) (Per Person) Double Occupancy
Arrival date: _____			
Departure date: _____	<u>Room category</u>		<u>Package Cost</u>
	Superior Hill View-no balcony	_____	\$2,949
	Classic Seaview with balcony	_____	\$3,469
	Superior Seaview with balcony	_____	\$3,838

Cost of extra nights and additional persons: _____
Please call for details.

Minimum stay: 7 nights.

Hotel package payment: \$750 per person due with this reservation:
Balance due: **March 1, 2025.**

Note: Hotel package costs are subject to change without notice.

REGISTRATION FORM (CONTINUED)- Italy 2025

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, 2025]

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, 2025

Hotel Cancellation: Refunds for hotel cancellations will be made, **IN FULL**, if cancellation is made in writing **on or before March 1, 2025**. **No hotel refunds after March 1, 2025**. Any cancellations on or before March 1, 2025 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, 2025**. With respect to a cancellation occurring **after March 1, 2025**, 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, 2025, 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, PO Box 375, Burlington, MA 01803

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

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