

# 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](mailto: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, 2025	By June 30, 2025	After June 30, 2025	Cost includes all materials Conference fees include \$200 Italy conference surcharge.
_____ 40 CPEs	\$2,499	\$2,599	\$2,699	
_____ 32 CPEs	\$2,398	\$2,498	\$2,598	
_____ 24 CPEs	\$2,297	\$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:

MC  
 VISA

**COST:**

Conference fee \$ \_\_\_\_\_

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

TOTAL AMOUNT \$ \_\_\_\_\_

*[Balance of hotel package due March 1, 2025]*

\_\_\_\_\_ 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](mailto: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](mailto: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](http://www.nticpe.com).

1-26-25 rev

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 EMAIL: conferences@nticpe.com**