

2009 Tax Institutes Registration Form

Enrollment is limited, so register early!



Please print clearly using black ink.

Full **LEGAL** Name _____

Street _____

City _____ State _____ ZIP _____

Email _____

Daytime Phone(s) _____

Company _____

Please advise us when you enroll if you require special accommodations.

Registration Fees *(Please do not send certified or express mail.)*

I am registering for the institute at (site) _____
to be held on (date) _____

\$270 early bird registration (if received or postmarked by your selected institute's early
bird deadline)

\$315 regular registration Total amount enclosed: _____

Payment

You can reserve your space online at scs.indiana.edu/nc/taxpracinst.html. Online registration is available 24/7 and is the quickest and most secure way to register.

Check or money order payable to Indiana University Conferences #50-09

American Express Discover MasterCard Visa

Name on Credit Card

Credit Card No. Exp. Date

Cardholder's Signature

Send your completed registration form to

Tax Practitioner Institutes • Attn: Conference Registrar • Indiana University Conferences •
Alice M. Nelson Building • 801 N. Jordan Ave., Suite 101 • Bloomington, IN 47405 • Fax: 812.855.8077