

**Institute for Professionals in Taxation®**  
**2017 State Income Tax Symposium**

The Palmer House Hilton \* Chicago, IL \* November 12 - 15, 2017

**REGISTRATION FORM**

**CONTACT INFORMATION**

Full Name:  Mr.  Ms \_\_\_\_\_  CMI

Title: \_\_\_\_\_ Badge Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

If not staying at symposium hotel, please specify: \_\_\_\_\_

By Oct 18      After Oct 18

Member fee (personally holding a membership)

\$695

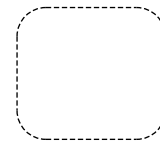
\$745

Non-Member fee (company has IPT members)

\$945

\$995

TOTAL



**By submitting this registration form, I affirm that I do not personally represent any government agency or official in a tax matter adverse to any business.**

**METHOD OF PAYMENT**

Check       Credit Card:       Master Card       Visa       AMEX

Please make check payable to:

Name: **Institute for Professionals in Taxation**  
Address: **1200 Abernathy Road, NE, Suite L-2**  
**600 Northpark Town Center**  
**Atlanta, GA 30328**

Phone: **(404) 240-2300**

Fax: **(404) 240-2315**

Card Number: \_\_\_\_\_

CVV/Security Code: \_\_\_\_\_ Exp. Date(MM/YY): \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Billing Address: \_\_\_\_\_

**PAYMENT & CANCELLATION**

Refunds, subject to a cancellation charge of \$100, will be made upon written notification by November 3, 2017. **No refunds will be made after November 3, 2017.** There is also a substitution charge of \$40 before November 3, 2017; \$50 after that date (Substitute must be someone from your company). Registrations may be scanned and emailed to [tmiller@ipt.org](mailto:tmiller@ipt.org). A confirmation will be sent via email.