

Order Form

Birth Month/Day ____ / ____	Online Fall Tax School
Last Name	Day 1
First Name MI	All Day: <input type="checkbox"/> Nov. 20 <input type="checkbox"/> Nov. 28 <input type="checkbox"/> Nov. 29
Organization/Firm	Mornings: <input type="checkbox"/> Nov. 14-15 Afternoons: <input type="checkbox"/> Nov. 14-15
If you are registering for Fall Tax School, you must provide a street address. We will ship the book(s) that accompany instruction before your online sessions. We cannot ship to PO boxes.	Day 2
Street Address	All Day: <input type="checkbox"/> Nov. 21 <input type="checkbox"/> Nov. 30 <input type="checkbox"/> Dec. 1
Address Line 2	Mornings: <input type="checkbox"/> Nov. 16-17 Afternoons: <input type="checkbox"/> Nov. 16-17
City	Registration Fee for 2-Day Seminar:
State Zip Code	2-Day \$290 (\$350 after October 10)* \$
Daytime Phone ()	Registration Fee for 1-Day Seminar only (Day 1 or Day 2):
E-mail:	\$170 (\$200 after Oct 10) \$
ARDC#:	2-Day In-Person Fall Tax School
CFP#:	<input type="checkbox"/> Mon., Oct. 30 & Tues., Oct. 31
NPN#:	Tinley Park Convention Center, Tinley Park, IL
PTIN# (EAs and AFSP participants only):	<input type="checkbox"/> Wed., Nov. 1 & Thurs., Nov. 2
<input type="checkbox"/> I am a current University of Illinois employee.	Harper College, Palatine, IL
	<input type="checkbox"/> Tues., Nov. 7 & Wed., Nov. 8
	I Hotel and Conference Center, Champaign, IL
	Registration Fee for 2-Day Seminar:
	2-Day \$350 (\$410 after October 10) \$
	This includes a non-refundable facilities fee of \$60.
	Limited seating available.
Payment	CPE Filing Fee Per Day (online & in-person):
<input type="checkbox"/> Make checks payable to University of Illinois (\$60 fee for returned checks)	<input type="checkbox"/> IL Insurance \$15 x ____ (days) \$
<input type="checkbox"/> Credit cards accepted: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover <input type="checkbox"/> AmEx	<input type="checkbox"/> CFP \$25 x ____ (days) \$
	<input type="checkbox"/> IL MCLE \$25 x ____ (days) \$
Credit card number	Subtotal \$
Exp. Date Security Code	Staying Ahead of the Game: Farm Tax Strategies
Name (on card)	Tuesday, Sept. 26
Billing Street Address, City, State, Zip Code	\$260 \$
Signature	Filing Fee: <input type="checkbox"/> \$25 IL MCLE Credit \$
	Subtotal \$
	Total Payment \$

Mail To:

University of Illinois Tax School
412 Mumford Hall, MC-710
1301 W. Gregory Drive
Urbana, IL 61801

Fax To:

217-244-5933

*This discounted rate only applies when registering for both days during the same transaction. If you later decide to register for an additional day, the per-day fee applies to the additional day.

OFFICE USE ONLY Postmark date: _____ Reg. _____ Total Payment: _____
☐ Personal _____ ☐ Company _____ ☐ Terminal _____ ☐ Cash _____