

2008 account-fest

registration form

Please use a separate form for each registrant. Registration forms may be photocopied. **PLEASE PRINT OR TYPE.**

Name: _____ Nickname: _____

TSCPA Member Number: _____ Preferred Mailing: Home Work

Business Name: _____

Address: _____ PO Box: _____

City/State/ZIP: _____

Daytime Phone: _____ Fax: _____

E-mail: _____

Check here if this is a change of address.

Check all that apply: CPA Not a CPA TSCPA Member Non-Member

Do you require continuing legal education (CLE)? Yes No BPR number: _____

Do you require CFP continuing education (CFP)? Yes No CFP ID number: _____

PAYMENT INFORMATION (Credit card registrations may be faxed to 615/309-8054 or 615/377-3904.)

Please choose which concurrent sessions you wish to attend:

thursday • december 18 • nashville

8 a.m. - 11:30 a.m.

- Controller's Update: Latest Trends for Today's Financial Manager (343)
- S Corporations: Strategies from Formation to Termination (344)
- Cash and Tax Basis Financial Statements - Alternatives to GAAP & Reporting Requirements (347)
- Accounting and Auditing Update (349)

1 p.m. - 4:30 p.m.

- Innovative Tax Tips for Individuals (342)
- Reviewing Field Work Documentation (345)
- Forensic Accounting: Uncovering Schemes and Scams (346)
- Taking Planning and Budgeting to a Higher Level: Critical Skills to Make the Trip (348)

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8 a.m. - 11:30 a.m.

- Decision-Making Tips, Tools and Techniques for Today's Financial Environment (352)
- 2007 Revised Yellow Book for Financial Audits (357)
- Effective Strategies in Dealing with the IRS (358)
- Compilation, Review and Accounting Service Update (359)

1 p.m. - 4:30 p.m.

- Choice of Entity: Selecting a Business Structure to Match Business Strategy (353)
- Analyzing Costs, Productivity and Efficiency: Three Ways to Boost Your Bottom Line (354)
- Managing Compilation, Review and Accounting Services (355)
- Annual Update for State & Local Governments and Not-for-Profits (356)

PAYMENT INFORMATION (Credit card registrations may be faxed to 615/309-8054 or 615/377-3904.)

Total number of programs for TSCPA member attendee: _____ x \$135 = \$ _____

Total number of programs for nonmember attendee: _____ x \$160 = \$ _____

CLE fee(s) (if applicable please add \$6 per course): _____ \$ _____

Late fee(s) (if applicable): _____ \$ _____

Your Total: \$ _____

Charge To: MasterCard Visa

Cardholder Name: _____

Card Number: _____ Expiration Date: _____

Credit Card Security Code (last three digits on back of credit card): _____

Cardholder Signature: _____

Check enclosed payable to:

Educational & Memorial Foundation of TSCPA
201 Powell Place, Brentwood, TN 37027

If you have special needs under the Americans with Disabilities Act, please attach a written description or call the society office at 615/377-3825 or 1-800/762-0272.

TSCPA reserves the right to change any portion of this program due to unforeseen circumstances.