Seminar Registration

Fall 2026

ADVANCED SALES & USE

☐ **November 9-12, 2026**
1:00 PM-5:30 PM ET Live Online
☐ **$885 EARLY REGISTRATION * *****
(Must be received by ITC by 10/19/26 to qualify)
☐ **$925 REGULAR REGISTRATION *****
(If received by ITC 10/20/26 or later)

ADVANCED INTERSTATE

☐ **November 16-19, 2026**
1:00 PM-5:30 PM ET Live Online
☐ **$885 EARLY REGISTRATION * *****
(Must be received by ITC by 10/26/26 to qualify)
☐ **$925 REGULAR REGISTRATION *****
(If received by ITC 10/27/26 or later)
☐ **DISCOUNT BOTH ADVANCED SEMINARS ($60)**

SALES & USE TAX PLANNING

☐ **December 1-4, 2026**
1:00 PM-5:30 PM ET Live Online
☐ **$885 EARLY REGISTRATION * *****
(Must be received by ITC by 11/10/26 to qualify)
☐ **$925 REGULAR REGISTRATION *****
(If received by ITC 11/11/26 and later)

INTERSTATE TAX PLANNING

☐ **December 7-11, 2026**
12: 30 PM-5:30 PM ET Live Online
☐ **$1110 EARLY REGISTRATION * *****
(Must be received by ITC by 11/16/26 to qualify)
☐ **$1150 REGULAR REGISTRATION *****
(If received by ITC 11/17/26 and later)
☐ **DISCOUNT BOTH PLANNING SEMINARS ($75)**

CONTINUING EDUCATION CREDIT

☐ Attorney ☐ CPA
☐ License # _____
☐ Accrediting Org. _____
_____
(e.g., Texas Board of Accountancy)

*Early Registrations must be received with payment by Interstate Tax Corporation by the dates listed above (3 weeks before a seminar start date) to qualify for the Discounted Rates.

***All Fees must be paid in U.S. dollars

FEES

TOTAL $ _____

TO REGISTER

Please complete this form (one for each attendee) and send the entire page with full payment to Interstate Tax Corporation. You may call us at 203-854-0704 to register by phone, fax your credit card registration to (203) 853-9510, or mail your registration (with check or credit card authorization) to:

Registrar, Interstate Tax Corporation
83 East Avenue, Suite 110, Norwalk, CT 06851

Name _____

Title _____

Organization _____

Address _____

City, State, Zip _____

Phone ** _____

Email _____

****Note:** Please fill in the phone number where you can be reached during the seminar, even if this is not your regular office number.

☐ **Check enclosed (payable to Interstate Tax Corporation)**

I authorize you to charge my:

☐ Visa ☐ Mastercard ☐ Amex ☐ Discover

Card # _____

Sec. Code _____ Billing Address Zip Code _____

Cardholder Name _____

Signature _____ Exp Date _____