



REGISTRATION FORM



WEBSITE

<https://www.hscpa.org>
(Member login required for discounts)



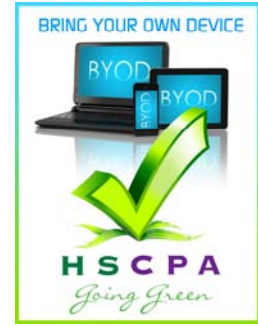
FAX

Completed Registration Form with credit card payment to:
(808) 537-3520



MAIL

Completed Registration Form with check or credit card payment to:
P.O. Box 1754
Honolulu, HI 96806



| REGISTRANT | SEMINAR DATE | SEMINAR TITLE | CODE | FEE | \$25 PER MANUAL |
|------------|--------------|---------------|------|-----|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |



Seminar materials available online under Members/E-Materials (\$25 per PRINTED manual)



P

If left blank, seminar manual will only be available electronically through the website (printed copy must be ordered and paid for 5 days prior to seminar)

AICPA Member No. _____ Required for discount on AICPA seminars, where indicated

FIRM _____

CONTACT _____

ADDRESS / CITY / STATE / ZIP _____

PHONE _____ E-MAIL _____

PAYMENT: CHECK NO. _____   EXP. DATE ____ / ____

CARD NUMBER _____ CVV _____

SIGNATURE _____

PRINT NAME ON CARD _____

Completed form required for confirmation

Please send to: Hawaii Society of CPAs
P.O. Box 1754
Honolulu, HI 96806