

## RUNNING START - 2020 SEMINAR REGISTRATION FORM

San Diego Chapters

(This form can be completed in Adobe Reader)

## A COMPREHENSIVE 1-DAY TAX SEASON PRIMER FEATURING THE TOP TAX PROFESSIONALS FROM BRASS TAX

IRS & CTEC Federal Update Hours: 6 CTEC State Hours: 2

1 CHOOSE A LOCATION (Registration: 7:30 am Seminar: 8:00 am to 4:50 pm)											
Selec	t a Dat	е	Location			Contact		Email, or mail to Running Start @			
Thursday, January 9, 2020 San Diego Chapter			Handlery Hotel 950 Hotel Circle North Mission Valley, CA 92108		nadinea	Nadine Allevato nadineallevato@gmail.com (858) 549-9500		11990 Avenida Consentido San Diego, CA 92128 Fax: (858) 536-9709			
Friday, January 10, 2020 East San Diego County Chapter			300	Sycuan Resort 3007 Dehesa Road El Cajon, CA 92019		Justin Price justinpricetax@gmail.com (619) 818-2328		16716 Georgios Way Ramona, CA 92065 Fax: (888) 275-5135			
Saturday, January 11, 2020 North San Diego County Chapter			California Center for the Arts 340 N. Escondido Blvd. Escondido, CA 92025		Sterli	Vanessa Sterling Tax Group Inc. cstcnorthsdcounty@gmail.com (760) 931-1925		1925 Palomar Oaks Way, Ste. 10 Carlsbad, CA 92008 Fax: (760) 438-4501			
2 DETERI	MINE	YOUR R	EGISTI	RATION FEE*	(Fee include	es continental	breakfast,	lunch and	l coffee	breaks)	
Fee Description			Member Fee		Non-Men	Non-Member Fee La		st Day to Register at This Fee			
Priority Registration			\$210		\$24	\$245		November 30, 2019			
Regular Registration			\$230		\$20	\$260		Day before the seminar			
Late Registration			\$27	<b>'</b> 5	\$29	\$295			Day of seminar		
*Refund Policy:	Fee le	ess \$25 wher	n a written	request is received	l on or before	12/15/19. <u><b>Sorr</b></u>	y, no refund	ds after 12	<u>2/15/19.</u>		
3 REGIST	RAT	ION INFO	PRMATI	ON (Enter <u>E)</u>	KACTLY a	s it appear	s on you	ır PTIN	regis	tration)	
Name											
Badge Name											
Address											
City					State	State		Zip Code			
Email	mail			Phone		сятс с		apter			
Meal Choice		Chef's Choice Vegetarian									
4 PROFE	SSIO	NAL CRE	EDENTI	ALS (List cred	dentials fo	or all that a	pply)				
PTIN		СРА		EA	(	CTEC		CFP		ATTORNEY	
5 PAYME	NT (I	Make you	ır check	∟ c payable to C	STC, or p	rovide cre	dit card	informa	tion k	pelow)	
Fee Amount		Payment Method			Check or Credit Card #			Exp Date		CVV	
	Check Visa			Mastercard				-			
Cardholder signature:											
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