

Company: _____

**Breakout Session details can be found at www.macpas.com/2015trends*

Name: _____ Title: _____

Email: _____ Breakout Selections: B-1 B-2 B-3 B-4
(Morning) (Afternoon)

Name: _____ Title: _____

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(Morning) (Afternoon)

Payment Information:

\$50 Registration Fee (per person)

A check for the registration fee is enclosed, made out to McKonly & Asbury.

Please charge my credit card.

MasterCard Visa Discover Card #: _____

Exp. Date: _____ CVV2/CVC2: _____ Cardholder Name: _____

Billing Address: _____

**Please send completed form to the attention of Melissa Roberson at:
McKonly & Asbury, 415 Fallowfield Road, Camp Hill, PA 17011
or by email at events@macpas.com or by fax at 717-972-6006.**

Once registration form and payment are received, confirmation of registration will be sent to the email addresses entered above.

No refunds for no-shows or cancellations after September 9. Substitutions are permitted.

Should you have any special dietary needs or restrictions, please let us know upon registration.

Please contact Melissa Roberson at 717-972-5822 or events@macpas.com with any questions.