

# 2023 Payroll Issues for Multi-State Employers – Registration Form

Register online: [www.americanpayroll.org/multistate.html](http://www.americanpayroll.org/multistate.html)

## 1

### REGISTRATION

#### I would like to:

Register for the following *Payroll Issues for Multi-State Employers* class:

Date: \_\_\_\_\_ Course Code: \_\_\_\_\_

I am an APA MEMBER .....\$560

I am a COLLEAGUE of an APA Member (at the same street address) ....\$680

Member's Name: \_\_\_\_\_

Member's ID #: \_\_\_\_\_

I would like to JOIN APA now and register for this course at the member rate .....\$893

Class Registration Fee at Member Rate .....\$560

Annual Membership Dues\*.....\$298

One-Time Enrollment Fee.....\$35

**TOTAL ..... \$893**

I am not an APA Member or Colleague.....\$830

Register for the following Webinar or Webinar On Demand\*\*:

	Live	On Demand	
Segment 1 .....	<input type="checkbox"/> 23MUL01L.....	<input type="checkbox"/> 23MUL01R .....	\$199 <sup>†</sup>
Segment 2 .....	<input type="checkbox"/> 23MUL02L.....	<input type="checkbox"/> 23MUL02R.....	\$199 <sup>†</sup>
Segment 3 .....	<input type="checkbox"/> 23MUL03L.....	<input type="checkbox"/> 23MUL03R.....	\$199 <sup>†</sup>
Segment 4 .....	<input type="checkbox"/> 23MUL04L.....	<input type="checkbox"/> 23MUL04R.....	\$199 <sup>†</sup>
All 4 Segments .....	<input type="checkbox"/> 23MUL05L.....	<input type="checkbox"/> 23MUL05R.....	\$560 <sup>†</sup>

#### YOUR REGISTRATION INCLUDES:

- ✓ Up to 6 RCHs, 0.6 CEUs, or 7 CPE credits
- ✓ An individual PDF of the course workbook for Interactive Virtual classes, Webinars, and Webinars On Demand

## 2

### REGISTRANT INFORMATION

#### Registrant's Primary Address (Please print)

Name: \_\_\_\_\_

Member ID #: \_\_\_\_\_  
(Update your contact information at [www.americanpayroll.org](http://www.americanpayroll.org))

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Country: \_\_\_\_\_

Zip + 4-Digit/Postal Code: \_\_\_\_\_ + \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
(Area/Country Code) (Area/Country Code)

Email: \_\_\_\_\_

(For official APA communications, registration confirmations, webinar materials, Payroll Currently, and PAYTECH-Digital)

Please indicate if you are:  CPA  PA (For NASBA reporting purposes)

#### Needed for account verification

Birth date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### Registrant's Secondary/Home Address

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Country: \_\_\_\_\_

Zip + 4-Digit/Postal Code: \_\_\_\_\_ + \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
(Area/Country Code) (Area/Country Code)

Email: \_\_\_\_\_

## 3

### PAYMENT INFORMATION

Payment in U.S. dollars must accompany registration form.  
Currency Converter: [www.xe.com](http://www.xe.com)

I have read and agree to the Event Policies found at <http://bit.ly/APA-policies>.

#### Three Enrollment Options:

Online  Fax  Mail  
[www.americanpayroll.org/multistate.html](http://www.americanpayroll.org/multistate.html) (210) 224-6038 To address below

I authorize the API Fund for Payroll Education, Inc. to CHARGE \$ \_\_\_\_\_ to my:

American Express  Discover  Mastercard  Visa

Card is: (check one)  Corporate  Personal

Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Name on Credit Card: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_

Purchase Order #: \_\_\_\_\_ (for government agencies/universities only)

Make CHECK payable and mail to:

**American Payroll Association**  
c/o Customer Service  
660 North Main Avenue, Suite 100  
San Antonio, TX 78205-1217

Phone: (210) 224-6406 • M–F, 7 a.m. – 5 p.m. CT

Email: [apa@americanpayroll.org](mailto:apa@americanpayroll.org) • Visit: [www.americanpayroll.org](http://www.americanpayroll.org)

#### Have you ever:

Purchased something from the APA?  Yes  No

Had a membership with the APA?  Yes  No

If yes, what name was it under?

What was the company name?

For all program information go to: [www.americanpayroll.org/multistate.html](http://www.americanpayroll.org/multistate.html)

Please read our Event Policies regarding registration, transfers, substitutions, cancellations, refunds, and consent to use your contact information.

\*Dues are subject to change without notice and are nonrefundable. Membership is on an individual basis; corporate memberships are not available. An enrollment fee of \$35 is charged to all new members. 100% of APA membership dues are deductible as an ordinary business expense.

\*\*You may be required to pay sales tax on this item. Please visit [www.americanpayroll.org/sales-tax](http://www.americanpayroll.org/sales-tax) for a list of applicable sales tax.

†Prices listed are for Members. Go to [www.americanpayroll.org/multistate.html](http://www.americanpayroll.org/multistate.html) for Colleague and Non-Member prices.

Last updated: February 2023

EMT: 9V

FOR OFFICE USE ONLY:

Date: \_\_\_\_\_ Order #: \_\_\_\_\_ Batch #: \_\_\_\_\_ Group #: \_\_\_\_\_ Check #: \_\_\_\_\_ C/P: \_\_\_\_\_ Total: \$ \_\_\_\_\_