

## Order Form

**Please send me the following PRODUCTS:**

| Product Name | Product Code | Quantity | Price |
|--------------|--------------|----------|-------|
| _____        | _____        | _____    | _____ |
| _____        | _____        | _____    | _____ |
| _____        | _____        | _____    | _____ |

Less quantity discount on books (if applicable) US\$ \_\_\_\_\_

To order *PayTrain Fundamentals* or *PayTrain Mastery*, visit [www.learnpayroll.com](http://www.learnpayroll.com) or call +1 800 444 5015.

**Shipping & handling (does not apply to eBooks or subscriptions):**

U.S. add 7% of product subtotal; outside U.S. add 25% of product subtotal US\$ \_\_\_\_\_

**Product Subtotal** US\$ \_\_\_\_\_

Please determine your applicable sales tax and remit to PayrollOrg with your payment.

You can determine your sales tax by going through the checkout process

online for the product(s) you are purchasing. [Payroll.org/salestax](http://Payroll.org/salestax). US\$ \_\_\_\_\_

**(A) Total for Products** US\$ \_\_\_\_\_

**Please register me for the following COURSES:**

| Course Name | Course Code | Course Location | Course Date(s) | Price |
|-------------|-------------|-----------------|----------------|-------|
| _____       | _____       | _____           | _____          | _____ |
| _____       | _____       | _____           | _____          | _____ |
| _____       | _____       | _____           | _____          | _____ |

**(B) Total for Courses** US\$ \_\_\_\_\_

**(C) One-year membership dues & fees, if applicable (PayrollOrg: US\$340)** US\$ \_\_\_\_\_

**(A+B+C) TOTAL AMOUNT PAID** US\$ \_\_\_\_\_

## Registrant Information

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

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

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

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Country: \_\_\_\_\_ Zip+4-digit/Postal Code: \_\_\_\_\_ + \_\_\_\_\_

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

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

(For official PayrollOrg communications, registration confirmations, *Payroll Currently*, and *PAYTECH-Digital*)

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

Special Dietary Request:  Vegetarian  Gluten-free  Kosher

Dairy Allergy  Peanut Allergy  Shellfish Allergy  Vegan

Special dietary requests received less than two weeks from event start cannot be guaranteed.

I am a PayrollOrg MEMBER. ID# \_\_\_\_\_

(Update your contact information at [Payroll.org](http://Payroll.org))

I am a COLLEAGUE of a PayrollOrg Member (at the same street address)

Colleague's ID #: \_\_\_\_\_

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

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

I want to join PayrollOrg now:

Annual Membership Dues\* US\$305 + One-Time Enrollment Fee US\$35 = US\$340

I am NOT a PayrollOrg Member or Colleague. ID# (if known): \_\_\_\_\_

**Needed for account verification** Birth date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Payment Information

Payment in U.S. dollars must accompany your order.

Currency Converter: [www.xe.com](http://www.xe.com)

**Purchase options:** **Online**

Payroll.org

**Mail**

To address below

**CAMPAIGN CODE\*\*** \_\_\_\_\_

**DISCOUNT AMOUNT** US\$ \_\_\_\_\_

**CREDIT ON ACCOUNT**

**PURCHASE ORDER #** : \_\_\_\_\_ (government agencies/universities only)

**CHECK #**: \_\_\_\_\_

Please contact Customer Service at +1 210-224-6406 if you need assistance with placing your order.

**Make CHECK payable and mail to:**

**PayrollOrg**

660 North Main Avenue, Suite 100

San Antonio, TX 78205-1217 USA

**Email:** [CustomerService@payroll.org](mailto:CustomerService@payroll.org) • **Visit:** [Payroll.org](http://Payroll.org)

**Phone:** +1 210 224 6406 • M-F, 7 a.m. – 5 p.m. CT

I have read and agree to the Event Policies found at [Payroll.org/policies](http://Payroll.org/policies), which include a Code of Conduct and an Attendee Liability and Waiver of Claims.

### Have you ever:

Purchased something from PayrollOrg (formerly APA and GPMI)?  Yes  No

Had a membership with PayrollOrg (formerly APA and GPMI)?  Yes  No

If yes, what name was it under? \_\_\_\_\_

What was the company name? \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Date: \_\_\_\_\_ Order #: \_\_\_\_\_ Control Batch: \_\_\_\_\_

Check #: \_\_\_\_\_ C/P: \_\_\_\_\_ Total: \$ \_\_\_\_\_

\***Membership dues are subject to change without notice and are nonrefundable.** Membership is on an individual basis; corporate memberships are not available. 100% of membership dues are deductible as an ordinary business expense. An enrollment fee of \$35 is charged to all new members and to reinstate members inactive for more than 90 days.

\*\***Campaign Code Restrictions:** Discount does not apply to Membership dues, *PayTrain® Mastery*, *PayTrain® Fundamentals*, FPC Boot Camp, CPP Boot Camp, FPC exam fees, CPP exam fees, FPC recertification fees, CPP recertification fees, Congress, *PayrollOrg Guide to Accounts Payable*, *PayrollOrg Basic Guide to Payroll*, or purchases prior to the start date of the campaign code.