BUSINESS RELATIONS TRAINING
REGISTRATION FORM

How did you hear about us?: _____

Course: 2022 / 2023 Comp Tax Course

Name:	**Phone:**	
Address:		
City:	**State:**	**Zip:**
E-mail:		

Payment Options

☐ 2022 Comp Tax Course/SW Bundle $499.50 as deposit or $ 999.00 full payment for the online classroom course software bundle

☐ 2022 Comp Tax Course/Multi Reg $249.75 as deposit or $499.50 full payment for online classroom Tax Course

☐ (Other Amount) $_____ a_____ payment. Payment)

Choose your Payment Method: ❑ American Express ◯ Discover ◯ MasterCard ◯ Visa ◯ Check ◯

A convenience fee of $5.95 will added to your total for processing.

❑ Please charge $ to my credit card	❑ Payment of $ is in the mail	
Credit Card Number:	**CVV:**	**Exp Date:**
Signature:	**Date:**	

BILLING ADDRESS SAME AS ABOVE? YES/NO **BILLING ADDRESS:**

Group-Live Classroom Enrollment Terms

The live classroom course is offered and is subject to cancellation in the event of insufficient enrollment. Students will receive training in the subjects outlined in the promotional literature. Completion of the course does not guarantee contractual, employment opportunities. A nonrefundable $250 registration fee and apply unless Guru Professional Tax Solutions cancels the class, in which case, the registration fee will be refunded and upon return of any issued books in resalable condition, all material and book fees will be refunded in full. I have read and understand the cancellation and refund policy as stated above. The address below is to be used in all correspondence. Please enroll me in the Income Tax Course I've indicated above. I understand this agreement becomes a legally binding instrument upon registration of the course. For information regarding administrative policies, such as grievances, please contact our office at 225-926-8229.

I have read and understand the cancellation and refund policy as stated above. Please enroll me in the GURU Professional Tax Solutions Income Tax Course I have specified. I understand this agreement becomes a legally binding instrument upon the course facilitator's written acceptance of my application for admission. For more information regarding administrative policies please contact our office at 225-925-8298.

Signature: _____ **Date:** _____

Please return to:

Email, Fax or

Dropoff

GURU Professional Tax Solutions
4756 Monticello Blvd
Baton Rouge, LA 70814
225-926-8229
Fax: 225-218-6759
Email: class@protaxguru.com

Registration Taken By: _____ Date: _____ Payment Processed By: _____ Date: _____

Source: _____ Batch #: _____ Inv. #: _____ Approval Code: _____

Business Solutions Software Data Form

Company Information

Company Name:

Contact Name: Contact Title:

Email Address: Contact #:

Company Address:

Company City: Company State: Zip:

Company Master EFIN: EFIN Owner Name:

COMPANY SUB EFINS:

Company Bank Information

Bank Name:

Bank Account #: Bank RTN:

Name on Account:

Savings ◯ Checking Account ◯

OPTIONAL FEES

ADD ON FEE: $_____

DOC PREP FEE: $_____

•No payment under this Agreement can be made until

(a) Guru PTS has received a fully completed IRS Form W-9 from Company (See Attached W-9)

(b) Company has provided Company Bank Information

(c) Company has provided all accurate and updated EFIN numbers.

•Company must submit in writing to Guru, PTS any updates or changes to an EFIN for approval. EFIN changes that have not been submitted to Guru PTS and acknowledged by Guru PTS will not be eligible for payment under this Agreement.

•Setup is not effective unless this and all GURU PTS Agreements are fully executed by Company and Guru PTS's CEO, COO, or VP, Finance no later than December 31, 2022.

For Guru PTS

_____

Signature

_____

Printed Name

_____

Date

For Company

_____

Signature

_____

Printed Name

_____

Date

PRIOR YEAR BANK: _____ PY TOTAL RETURNS SUBMITTED :_____

PRIOR YEAR EFIN: _____ PY TOTAL RETURNS FUNDED: _____