



CPE and Event Registration Form

40 Sharpe Drive, Unit 5
Cranston, RI 02920
office: (401) 331-5720
fax: (401) 454-5780

Name: _____
 Firm: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Firm Tel: _____ Home Tel: _____
 Email: _____
 Special Needs: _____

I am a CPA: Yes: _____ No: _____
 I am a member of _____ State Society
 I am a member of the AICPA: Yes: _____ No: _____
 • AICPA Membership Number: _____

Payment Options:

Mail form with Check payable to RISCPA
 *Email to RISCPAMembers@RISCPA.org
 *Fax to (401) 454-5780
 *Please include phone number for RISCPA staff to call for Credit Card payment.

Plan & Save Discount: RISCPA Member Benefit Register for 40 hours of CPE by June 30, 2021 and save \$100

Course ID	Title	Date	Credit Hours	Price	RISCPA Use Only
TOTAL AMOUNT DUE				\$ _____	
Plan & Save Discount - Register for 40 Hours of CPE by June 30, 2021 and save \$100. RISCPA Members only.				40	(\$100)
Total Amount Due with Discount				\$ _____	

If you need to cancel or transfer a seminar, please refer to www.riscpa.org/education/policies-and-regulations.