

2023-2024 NATP Membership Application Form

Name (as listed in the PTIN system)	(First)		(Middle)		(Last)	
Nickname				Customer II)	
Email address (required)						
Website						
Company name			<u>.c</u>	CTEC#		
Mailing address			C.			
City						
Phone		•				
				e news alerts &		
Who recommended you to NATP?						
Do you prepare tax returns? □	Yes □ No					
Professional designation ☐ AFSP	□ Attornev □ FA	□ CFP®	□ CPA	□ CRTP	□ Other	
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Payment must accompany application. NATP reserves the right to charge your credit card for errors or omissions that are made when submitting this form. When paying by check, if your check is dishonored or returned for any reason, you will be charged a processing fee of \$25.

Credit card billing address _____ City ____ State ___ Zip ____

☐ Save this card card for future use

☐ Check if billing address is the same as mailing address

NATP dues may be deducted as a business expense, but not as a charitable contribution. NATP estimates that 2% of your dues are not deductible because of NATP's lobbying activities on behalf of its members.

NATP, PO Box 8002, Appleton, WI 54912-8002