

HSRP 2008 Registration Form

Name of Firm/Company _____

Contact _____

Phone _____ Fax _____

Email _____

Address _____

Sponsor Level _____

Does your firm/company have promotional items that can be given to students? Yes No

Will someone from your firm/company be attending any events at the HSRP? Yes No

Representative name: _____

Which location: University of Georgia Georgia Southern University

Payment Information:

Enclosed is a check made payable to Georgia Society of CPAs in the amount of \$ _____

Please charge my credit card:

Visa MasterCard AmEx Discover

Personal Card Company Card

Card Number: _____ Exp. Date _____

Signature: _____

Amount to charge card: \$ _____

Send sponsorship registration and payment to:

Nealy Wheat, Member Services Manager
Georgia Society of CPAs
3353 Peachtree Road NE, Suite 400
Atlanta, GA 30326-1414
404-504-2942 • Fax 404-237-1291 • nwheat@gscpa.org

Deadline: April 30, 2008