



Education • Integrity • Advocacy

2024 Membership Application

Regular (Practitioners) Associate (Interested Parties) Student Associate

Name: _____

Address: _____

Phone Number: _____ Email: _____

I hereby agree to abide by the Bylaws of the Association, conduct myself and my tax practice ethically and complete 15 hours of continuing education each year if applying as a regular member.

Note: No CPE requirement for first partial year of new membership.

X _____

SIGNATURE

Membership Dues for 2024

\$ 84.00

Membership year is Jan 1, 2024 to Dec 31, 2024

Don't forget you receive a \$50 education credit for referring any first time members to IATC

Register Online:

www.iatcidaho.com/membership

Register By Mail:

Make Check Payable to:

Idaho Association of Tax Consultants

1613 12th Ave Rd St. B

Nampa, ID 83687

www.iatcidaho.com Email: iatc.mail@gmail.com

1613 12th Ave Rd St. B, Nampa, ID 83687 Phone: 208-467-6488