



A Great City Between Two Lakes

MSATA 2008 Annual Conference

August 17-19, 2008

Hosted by the Wisconsin Department of Revenue in Madison

Conference Registration

Please complete separate form for each registrant.

First Name		Last Name		Name for Name Tag	
Title			Agency/Organization		
Mailing Address					
City		State	Zip		
E-Mail Address					
Business Phone Number			Business Fax Number		
Guest First Name			Guest Last Name		

Hotel reservations must be made by July 24, 2008 with the Madison Concourse Hotel.

Make your reservation directly with the hotel by calling 1-800-356-8293. Please identify yourself as part of the Midwestern States Association of Tax Administrators (MSATA) when making your reservation.

www.concoursehotel.com

	Registered on or before 8-1-08	Registered after 8-1-08		
<input type="checkbox"/> Government	\$250	\$285		\$ _____
<input type="checkbox"/> Industry	\$350	\$385		\$ _____
<input type="checkbox"/> Sponsor	\$325	\$360	<i>(Please complete separate sponsor form.)</i>	\$ _____
<input type="checkbox"/> Exhibitor	\$325	\$360	<i>(Please complete separate exhibitor form.)</i>	\$ _____
<input type="checkbox"/> Guest *	\$125	\$125		\$ _____
<input type="checkbox"/> Golf Outing *	\$ 70	\$ 70	<i>(Please complete separate golf registration form.)</i>	\$ _____

If sending more than five attendees, the sixth registration is free.

Registration fee includes Sunday night reception, Monday breakfast, Monday lunch, Monday night reception at Wisconsin's Governor's Residence, Tuesday breakfast, and Tuesday closing banquet. The registration fee does NOT include hotel accommodations or the Sunday golf outing.

TOTAL DUE \$ _____

* Tax included

E-mail or FAX registration now to confirm attendance. – dormsata2008@revenue.wi.gov or (608) 261-6240

Make checks payable to MSATA 2008 and mail to:

MSATA's FEIN 52-1802956

Sharon Sellner, MS 6-40
MSATA 2008
PO Box 8933
Madison WI 53708-8933

Refunds will be issued through August 1.
Refunds will not be issued for no shows.

To assist us in planning, please indicate below which of the following activities you and/or your guest plan to attend.

Sunday		Monday			Tuesday	
<u>Golf</u>	<u>Reception</u>	<u>Breakfast</u>	<u>Lunch</u>	<u>Reception</u>	<u>Breakfast</u>	<u>Closing Banquet</u>
<input type="checkbox"/> You	<input type="checkbox"/> You	<input type="checkbox"/> You	<input type="checkbox"/> You	<input type="checkbox"/> You	<input type="checkbox"/> You	<input type="checkbox"/> You
<input type="checkbox"/> Guest	<input type="checkbox"/> Guest	<input type="checkbox"/> Guest	<input type="checkbox"/> Guest	<input type="checkbox"/> Guest	<input type="checkbox"/> Guest	<input type="checkbox"/> Guest

Please indicate any special needs (accommodations for disabilities, dietary needs, etc.) that you or your guest may have.

Check if you are interested in CPE or CLE credit for this program. MSATA has not applied for CPE or CLE credits for this program in any jurisdiction. By indicating here, you will be provided a Certificate of Attendance for the conference for use in applying for credits within your jurisdiction.

For more information on special events, please visit our web site at:

www.msatastates.org

Wisconsin Department of Revenue Conference Coordinators

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