



NATIONAL ASSOCIATION OF ENROLLED AGENTS

202/822-NAEA (6232)
Email: info@naeahq.org



CALIFORNIA SOCIETY OF ENROLLED AGENTS

3200 Ramos Circle • Sacramento, CA 95827-2513
916/366-6646 • 800/777-2732
FAX 916/366-6674
www.csea.org
Email: lcole@csea.org

MEMBERSHIP APPLICATION

(Please Print All Information)

- Mr.
Mrs.
Ms.

Last Name First Name or Initial Middle Name or Initial Nickname

Name as you wish it to appear on your Membership Certificate (if different from above).
Note: Professional designations are not included on certificates.

Birth Date

Business Address

Home Address (If different from business address)

Form fields for Business Address: Firm Name, Street, Apt/Suite, City, State, Zip, Telephone, Fax, Email.

Form fields for Home Address: Street, Apt/Suite, City, State, Zip, Telephone, and checkboxes for mail preference and volunteering interest.

Application for Regular Membership:

I am enrolled to practice before the Internal Revenue Service and hereby petition for active membership in the National Association of Enrolled Agents and the California Society of Enrolled Agents.

I understand and will abide by the rules promulgated in Treasury Department Circular 230, as amended, the Code of Ethics and Rules of Professional Conduct of the National Association of Enrolled Agents, and any revisions thereto which may hereinafter be enacted.

Signature Date
I consent to receive communications sent by or on behalf of CSEA and its Chapters via email, telephone, or fax.

SOURCE OF QUALIFICATION:

- Special Enrollment Exam Year of Exam
IRS Experience Date of Completion

Please take a moment to answer the following questions, so that we can serve you better!

- 1. How long have you been preparing tax returns?
2. What type of practice do you have?
3. If self-employed, do you have other tax preparers on staff?
4. How many returns do you prepare a year?
5. How did you find out about the California Society of Enrolled Agents?
6. In what areas of tax do you practice?

My payment of \$333.00 for the first year's dues (\$165 Association, \$140.00 Society) and initiation fees (\$10.00 Association, \$18.00 Society) is enclosed.

* Continuing education requirements are determined by the National Association and are currently 30 hours per CPE year (2/1 - 1/31).

Charge \$333.00 to my:

- Visa Mastercard AMEX Check Enclosed

Credit Card# and Expiration date (MO YR) fields.

Please Do Not Write In This Space. Rec'd, Amt., Ck.#, Batch#, ID#, Exp Dt., Cert Dt.

Enrollment Number, Signature (required for all applicants), Date, Chapter (If left blank, you will automatically be affiliated with a Chapter), Sponsor (optional).