
Low Income Taxpayer Clinic (LITC) Conference Registration

LITC name

Address

City

State

Zip Code

Attendee Name

Title

Phone number

Fax number

E-mail address

Emergency Contact Name & Telephone Number

Additional Attendee Information

Attendee name

Title

Phone number

Fax number

E-mail address

Emergency Contact Name & Telephone Number

Additional Attendee Information

Attendee name

Title

Phone number

Fax number

E-mail address

Emergency Contact Name & Telephone Number

Please note any accommodations you may need due to a disability:

Email completed form to Gerard.E.Pieger@irs.gov