



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



- Mr.
- Mrs.
- Ms.

**ENROLLED AFFILIATE APPLICATION**  
 (Please Print All Information)

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**

Firm Name (if any)	
Street	Apt / Suite #
City	State      Zip
Telephone Number	Fax Number
Email Address	

**Home Address (If different from business address)**

Street	Apt / Suite #
City	State      Zip
Telephone Number	

I prefer CSEA mail be sent to my:

Home Address       Business Address

I certify I am a Member in good standing of the National Association of Enrolled Agents. I agree to notify you if my membership in NAEA is terminated or suspended. I hereby apply for International Enrolled Affiliate Status with the California Society of Enrolled Agents, and agree to abide by the terms and conditions of such affiliation.

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

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

Membership dues are not deductible as a charitable contribution for tax purposes, but may be deductible as a business expense. Society dues include the nine-times-annually publication, *California Enrolled Agent* (\$25.00).

My payment of **\$95.00** for the first year's dues is enclosed.

Charge **\$95.00** to my:  
 Visa     Mastercard     AMEX     Check Enclosed

Credit Card#	Expiration date																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> <td style="width: 12.5%; text-align: center;">□</td> </tr> </table>	□	□	□	□	□	□	□	□	□	□	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">□</td> <td style="width: 25%; text-align: center;">□</td> <td style="width: 25%; text-align: center;">□</td> <td style="width: 25%; text-align: center;">□</td> </tr> <tr> <td style="text-align: center;">MO</td> <td style="text-align: center;">YR</td> <td colspan="2"></td> </tr> </table>	□	□	□	□	MO	YR		
□	□	□	□	□	□	□	□	□	□										
□	□	□	□																
MO	YR																		

**Please Do Not Write In This Space**

Rec'd _____	Amt. _____
Ck.# _____	Batch# _____
ID # _____	Exp Dt. _____
	Cert Dt. _____

_____ NAEA NUMBER	
_____ ID / LICENSE NUMBER	
_____ Signature (required for all applicants)	_____ Date