

American Accounting Association
2017 AUDITING SECTION MIDYEAR MEETING
January 12 – 14, 2017 • Orlando, Florida

ATTENDEE INFORMATION

Full Name: _____
(PLEASE PRINT) FIRST NAME MIDDLE INITIAL LAST NAME

AAA Member ID#: _____ Nickname for badge: _____

University Name or Affiliation: _____

Mailing Address: Home Work _____

City: _____ State: _____ Zip: _____ Country: _____

Email: _____ Phone: Home Work _____

REGISTRATION FEE (required) includes name badge (required for admittance to meeting events), meeting program, attendance list, breakfasts and lunches on Friday and Saturday, and Thursday, Friday and Saturday receptions.

| | | | |
|--|---|-------|----|
| Auditing Section Member | Registration Fee - on or before December 12, 2016 | \$295 | |
| | Late Registration Fee - after December 12, 2016 | \$325 | \$ |
| Non-Auditing Section Member* | Registration Fee - on or before December 12, 2016 | \$345 | |
| | Late Registration Fee - after December 12, 2016 | \$375 | \$ |
| AAA Student Member | Registration Fee - on or before December 12, 2016 | \$200 | |
| | Late Registration Fee - after December 12, 2016 | \$230 | \$ |
| <i>NOTE: This registration fee is for the Midyear Meeting but NOT for the Auditing Doctoral Consortium. If you wish to attend the Consortium, you must apply separately and you will be notified later as to whether your application has been approved.</i> | | | |

Attendee Special Meal Request: Vegetarian Vegan Gluten-Free

*Members of the American Accounting Association who are not already members of the **Auditing Section** may allocate \$50 of their registration fee to **join the Auditing Section**. Membership in the Auditing Section includes subscriptions to *Auditing: A Journal of Practice & Theory* and the Section's newsletter.

Indicate here if you are a current member of the AAA and would like to allocate \$50 of your registration fee to join the Auditing Section.

OPTIONAL EVENT - Thursday, January 12 (Meeting Registration Required):

| | | | |
|---|-------------------|-------|----|
| Excellence in Auditing Education Workshop | 1:00 PM - 5:30 PM | \$100 | \$ |
|---|-------------------|-------|----|

GUEST TICKETS (optional) - Paid attendees are welcome to bring a guest to the following social/meal functions for an additional fee. Please indicate below the name of the guest and the specific functions he/she will be attending.

Guest Name _____
(PLEASE PRINT) FIRST NAME LAST NAME

| | | |
|--------------------------|--------------|----------|
| Thursday Reception | _____ @ \$40 | \$ _____ |
| Friday Breakfast | _____ @ \$30 | \$ _____ |
| Friday Lunch | _____ @ \$40 | \$ _____ |
| Friday Reception | _____ @ \$30 | \$ _____ |
| Saturday Breakfast | _____ @ \$30 | \$ _____ |
| Saturday Lunch | _____ @ \$40 | \$ _____ |
| Saturday Reception | _____ @ \$20 | \$ _____ |

Guest Special Meal Request: Vegetarian Vegan Gluten-Free

TOTAL \$ _____

PAYMENT

Check Enclosed (payable to AAA)

Credit Card (MC, Visa and AMEX only, provide information below): MC Visa AMEX

Account Number _____ Exp. Date _____

Signature: _____

I agree to pay any late fees assessed if my registration is received after December 12, 2016.

CREDIT CARD BILLING ADDRESS, IF DIFFERENT FROM ABOVE:

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Registration paid by a credit card may be faxed to AAA at (941) 923-4093. Make checks payable to: **American Accounting Association**

Mail registration form and check to: **5717 Bessie Drive, Sarasota, FL 34233-2399**

CANCELLATION POLICY: All cancellations must be received in writing at AAA in order to be processed (email Info@aaahq.org). Cancellation requests received after December 12, 2016 will incur a \$50.00 cancellation charge. No refunds will be available for no-shows or cancellations after January 2, 2017.