



# Order Form

Items in red must be filled out.

1. **Personal Information**- Please print your name

Name \_\_\_\_\_  EA  CPA  JD  CFP  CSA

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

I would like to order the following book: The Doctor's Wealth Preservation Guide

I would like to order the following book: Wealth Preservation Planning: A "Team" Approach

I am member of the National Society of Accountants

2. **Payment to Accompany Form**: Remittance is by:  Check Payable to Rocco DeFrancesco  
 Credit Card Total \$ \_\_\_\_\_ 3 digit CC ID \_\_\_\_\_

3. **Credit Card Payment Options**:  Visa Card Number \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Return completed education registration form and payment to:

The WPI: 378 River Run Dr., St. Joseph, MI 49085. Fax: **269-408-1926**. Phone: 269-408-1841 Online: [www.thewpi.org](http://www.thewpi.org).

The address above needs to be the billing address for the credit card.