
Professional Services and Strategies

Professional Development

CSATP programs meet the requirements of the California State Board of Accountancy's Education Rule 88C, the Accreditation Council for Accountancy & Taxation, the California Tax Education Council and the IRS as programs which qualify for credit under continuing education. They also provide exceptional opportunities and resources for operating your practice efficiently and effectively.

CSATP Services:

Government Representation

CSATP is actively representing the interests of the independent and small business practitioner in California. CSATP monitors proposed legislation for its impact on the practice rights and opportunities of small business accounting and tax practitioners.

Education

CSATP is committed to premium quality continuing professional education at the lowest possible cost. Programs are run on a state-wide basis and through district/chapter programs.

Publications

The Monitor is a bi-monthly newsletter containing informative accounting and tax articles, legislative regulatory developments and updates, and news of the activities of CSATP, its chapters and its members.

With joint membership in CSATP and the National Society of Accountants your professional opportunities are expanded to include:

Insurance:

Group life and health, and professional liability.

Publication Discounts:

Tax publications from major publishers are discounted to NSA members.

Resource Information:

NSA's professional journal, National Public Accountant, and The NSA Practitioner, feature information on accounting, taxation and practice management.

Education:

Exceptional opportunities with national and regional programs for accounting and tax professionals.

Government Representation:

With NSA's Washington, D.C. area headquarters, Federal legislative support is available.

Legal Position

It shall be the policy of the California Society of Accounting and Tax Professionals to promote, encourage and solicit compliance with the California Supreme Court decision in reference to the use of the terms "accountant" or "accounting" by unlicensed accountants without a modifier, qualifier, or warning stating either that the person or firm is not licensed by the state or that services provided do not require state licensing.

It shall also be the responsibility of the Board of Directors of the California Society of Accounting and Tax Professionals to convey on a continuing and regular basis this policy to the membership of the California Society of Accounting and Tax Professionals.



◆ California Society of Accounting & Tax Professionals ◆

APPLICATION FOR MEMBERSHIP

California Society of Accounting and Tax Professionals

PMB #217, 5714 Folsom Blvd.

Sacramento, CA 95819-4608

(800) 894-8995

Fax: (626) 573-1724

E-mail: info@csatp.org

Website: www.csatp.org

*The only organization
in California serving
all accounting
and tax professionals*

Persons applying for membership in the California Society of Accounting and Tax Professionals must meet at least one of the qualifications listed below for either Active Membership, or Educator/Associate Membership.

Active Member Qualifications

Applicants for Active Membership must meet any one of the following requirements. Please check all that apply to you.

- I am enrolled to practice before the IRS. Please list your enrollment number # _____
- I possess a valid license as a Public Accountant or Certified Public Accountant. Please list your license number # _____
- I possess an associate degree or baccalaureate degree with a minimum of 24 semester hours in accounting. Please list degree(s), year(s) received and school(s) _____
- I am accredited by the Accreditation Council for Accountancy & Taxation in:
 - Accountancy Taxation Both
- I am registered by the California Tax Education Council # _____
- I have a minimum of 3 years Bookkeeping Experience in Public Practice.

Educator/Associate Qualifications

Applicant must meet any one of the following requirements. Please check all that apply to you.

- I am an instructor/teacher of accounting at an accredited university or community college.
- I am a partner/sole practitioner in an accounting/tax practice but I do not meet any of the requirements for Active Membership.
- I am an employee of an accounting and/or tax practice firm.
- I am employed in government, a financial institution, private sector business or non-profit entity, and my primary duties are in the field of accountancy.

Application for Membership



PMB #217, 5714 Folsom Blvd. (800) 894-8995
Sacramento, CA 95819-4608 Fax (626) 573-1724

Name _____
Please print or type your name as you wish it to appear on your CSATP Membership Certificate.

Address _____

City _____ State _____ Zip _____

Day Phone _____ Fax _____ Cell Phone _____

Email _____ Website _____

Name of Firm _____ Sole Practitioner Partnership Corporation

Names of Partners _____

No. of employees _____ Years experience in Accounting _____ Taxation _____ Public practice _____

National and State organizations you currently hold membership in:

- NSA CSTC SCA _____
- CSEA/NAEA CSCPA _____

Have you met the education requirement?
 Yes No

May we publish your name in a membership roster?
 Yes No

May we publish your name in the online directory?
 Yes No

Dues Investment Schedule
Annual dues are payable IN FULL in advance.

<input type="checkbox"/> Active Membership Annual Dues \$110	<input type="checkbox"/> Associate Membership Annual Dues \$70
<input type="checkbox"/> Educator Associate Annual Dues \$70	<input type="checkbox"/> Retired/Non-Practicing Annual Dues \$50

PAYMENT

Check enclosed Check # _____

Charge to: Visa

Amex Mastercard

Account # _____ Expiration Date _____

Signature _____

I hereby state that the accompanying statements are correct to the best of my knowledge and belief. I further state that I will abide by the Constitution and Bylaws of the Society and will practice in strict conformity with the Code of Ethics and Rules of Professional Conduct adopted by the Society.

Date _____ Signature of Applicant _____

IMPORTANT NOTE: A copy of your professional stationery or business card MUST accompany this application.

SPONSOR NAME (Print) _____ SPONSOR SIGNATURE _____