

# 2024 – 2025 Enrollment Application

Name

Business Name

Street Address (or P.O. Box)

City

State

Zip

Email

Phone

Designation

Enrolled Agent

Additional Designations

Attorney

CPA

AFSP

Payment Options:

The fee is \$40, payable with your application.

Include a check with your completed application,  
payable to *CT Society of Enrolled Agents, Inc*

Mail this form to: *Jonathan D Leone, Treasurer  
141 Durham Road Suite #14  
Madison, CT 06443*

**OR**

CtSEA also accepts Paypal®

1. Scan the  
QR Code



2. Email this form as an  
attachment to:

[Treasurer@ctsea.org](mailto:Treasurer@ctsea.org)