

NON-MEMBER FORM

NCRA REGISTRATION FORM FOR RPR WRITTEN KNOWLEDGE TEST

General Information

- You must read the entire Candidate Handbook prior to completing this form.
- To expedite your registration, you must complete each step.
- Questions or address changes should be directed to 800-272-NCRA (6272).
- All registrations must be received by the deadline.
- **Make copies of this form for future exams.**
- Once NCRA has received payment and verified eligibility requirements, candidates will receive an e-mail (or letter if no e-mail address is on file) on how to schedule their exams through Pearson VUE.
- Non-members are responsible for submitting their form.

Examination Dates	Registration Dates
January 11-23, 2010 <small>(RPR & CLVS only)</small>	December 7-January 6, 2009
April 5-17, 2010	March 1-March 31, 2010
July 5-17, 2010 <small>(RPR & CLVS only)</small>	June 1-June 28, 2010
October 4-16, 2010	August 30-September 29, 2010

1. NON-MEMBER INFORMATION

Print your Non-Member ID# (if known), Name, and Address:

Non-Member ID _____

2. REQUESTED EXAM

	Exam
Test	RPR
Written Knowledge Test	✓

- Check here if you have a disability and require accommodation to test. (You must call NCRA — see Disabled Candidates, page 4.)

3. CERTIFICATION STATE

AL AZ GA IN NJ NM WI OTHER _____ (Please contact NCRA for approval.)

4. EXAM FEES AND PAYMENT INFORMATION

- Exam fees include a non-refundable \$35 processing fee.
- There are no discounts on exam fees.

Non-member reporter fee: \$200 **Non-member student fee: \$165**

Payment method: Check Money Order MasterCard Visa Discover/Novus American Express
 Credit Card #: _____ Exp. Date: ___/___

Authorized Signature for Credit Cards: _____

Please provide your credit card's security code (the *last three* digits printed on the *back* of your Visa/MasterCard/Discover card or the *four* digits printed to the right and just above the account number on the *front* of your American Express card): _____

- ▶ Rejected credit cards will not be processed. ▶ Returned checks will be charged an additional \$15.
- ▶ For security purposes, please print your credit card billing address next to your member information above, if different from shipping or mailing address.

5. SIGNATURE

By submitting and signing this application, I acknowledge that this application will be reviewed and processed, and that the examination will be conducted in accordance with the rules and policies adopted by NCRA. I agree to hold harmless NCRA's members, examiners, officers and agents from any and all actions that they may take, or refrain from taking pursuant to such rules and policies. I understand that the exam registration fee includes a non-refundable \$35 processing fee.

Signature _____ Daytime Phone Number _____

E-Mail Address _____ Fax Number _____

6. MAIL FORM TO: NCRA, P.O. BOX 79511, BALTIMORE, MD 21279-0511