

Backflow Consulting Testing & Repair, Inc

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EXAM REGISTRATION

Please complete and return this form to our office at least two weeks prior to the exam date. Registrations received after this date may not be processed.

Student Information:

Today's Date: _____

ABPA Cert #: _____ Expiration Date: _____

Name: _____

Phone: _____

Address: _____

City: _____ St: _____ Zip: _____

Company/Organization: _____

Address: _____

City: _____ St: _____ Zip: _____

Date of Exam: __/__/2008

Type of Exam:

- Hands-On Portion ONLY (Applies if you passed the written exam within the last 12 months)
- Initial Written and Hands-On Portion (Applies if you are not ABPA Certified & need to take the initial exam)
- Recertification Exam (Applies if your current ABPA certification has or will expire within 6 months of test date)

Exam Fee: \$85.00

Payment Method -

Please Note: No Purchase Orders Accepted for Exam Registration

Check # _____ **Makes Checks payable to: ABPA**

If paying by credit card – student will enter information on ABPA Tester Certification Exam Application that will be provided on Saturday or you may download a copy from www.ABPA.org