

WALP Certification Testing Registration Form

Written Test

CANDIDATE INFORMATION:

Please send all correspondence to my: Home Work

Name: _____

Candidate Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Home Fax: (_____) _____

Home E-mail: _____

Company: _____

Work Address: _____

City: _____ State: _____ Zip: _____

Work Phone: (_____) _____ Work Fax: (_____) _____

Work E-mail: _____

STUDY GUIDES: *(Please indicate quantity. Prices include shipping & handling.)*

English	Member*	Non-Member	Spanish	Member*	Non-Member
<input type="checkbox"/> Installation	\$69	\$99	<input type="checkbox"/> Installation	\$69	\$99
<input type="checkbox"/> Irrigation	\$69	\$99	<input type="checkbox"/> Irrigation	\$69	\$99
<input type="checkbox"/> Maintenance	\$69	\$99	<input type="checkbox"/> Maintenance	\$69	\$99

* WALP, WSNLA, or OLCA Members

Washington State Residents Must Add Local Sales Tax \$ _____

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TOTAL STUDY GUIDE FEES: \$ _____

EXAM RETAKES:

In which state did you begin your CLT testing? _____

Retake Fees:	Member*	Non-Member		Member*	Non-Member
1 Problem	\$75	\$95	4 Problems	\$150	\$170
2 Problems	\$100	\$120	5 + Problems	\$175	\$195
3 Problems	\$125	\$145			

Please check/list the sections you need to retake:

- Softscape Installation _____
- Hardscape Installation _____
- Irrigation _____
- Turf Maintenance _____
- Ornamental Maintenance _____

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RETAKE FEE: \$ _____

NEW CANDIDATES:

First candidate from the same company:

	Member*	Non Member	Add'l. Module
<input type="checkbox"/> Softscape Installation	\$225	\$395	\$150
<input type="checkbox"/> Hardscape Installation	\$225	\$395	\$150
<input type="checkbox"/> Turf Maintenance	\$225	\$395	\$150
<input type="checkbox"/> Ornamental Maintenance	\$225	\$395	\$150
<input type="checkbox"/> Irrigation	\$225	\$395	\$150

Each candidate over two from the same company

<input type="checkbox"/> Softscape Installation	\$200	\$395	\$150
<input type="checkbox"/> Hardscape Installation	\$200	\$395	\$150
<input type="checkbox"/> Turf Maintenance	\$200	\$395	\$150
<input type="checkbox"/> Ornamental Maintenance	\$200	\$395	\$150
<input type="checkbox"/> Irrigation	\$200	\$395	\$150

* WALP, WSNLA, or OLCA Members

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TOTAL NEW CANDIDATE FEE: \$ _____

GRAND TOTAL: **1** + **2** + **3** \$ _____

PAYMENT INFORMATION:

- Check enclosed
 Please charge my credit card: Visa MasterCard

Credit Card #: _____ Exp. Date: _____

Name on Card: _____

Signature: _____

CANCELLATION POLICY:

Cancellations received 2 weeks prior to test date will be refunded the registration fee minus a \$40 administrative fee. Cancellations after this time period will not be refunded. There are no refunds for purchased Study Guides.

PLEASE RETURN WITH PAYMENT TO:

WALP – CLT Exam
23607 Highway 99, Suite 2C • Edmonds, WA 98026
Fax: (425) 771-9588 • Email: info@walp.org
Web site: www.walp.org

Questions? Please call the WALP Office at (425) 967-0729, (800) 833-2186.