

CLVS PRODUCTION EXAMINATION - SEPTEMBER 25-27, 2009 * ATLANTA, GA

- Registration for this exam will run July 20-31, 2009. This registration form must be completed, signed and received by NCRA with payment by July 31, 2009.
- Forms received before July 20, incomplete registration forms, incorrect payment, or registrations from candidates who have not passed the CLVS written test, will be returned unprocessed.**
- Candidates may register for this exam based on a passing result given to you a Pearson VUE testing center on the day of your written knowledge test. **You do not have to wait for your exact score to register for this test.**
- Due to space and time limitations, a set-number of time-slots are available. Once all time-slots are taken, a waitlist will be maintained. If you are waitlisted, you will be notified if, and when, a time-slot becomes available. NCRA does not defer exam costs.
- Submitting your registration form before the deadline does not secure you a spot.** Slots may fill before the deadline. **DO NOT** make travel reservations until you have received written confirmation of a time-slot.

A confirmation, in addition to more detailed testing information, will be sent electronically by August 4, 2009.

I hereby apply for admission to the CLVS Production Test to be held at the **Westin Peachtree Plaza, 210 Peachtree Street, NW Atlanta, Georgia**. I understand that the registration fee will not be refunded unless I notify NCRA on or before the close of business on **September 16, 2009**, and that \$35.00 will be retained for processing costs. I also understand that if I fail to appear to my examination that I have 30 days from the date of my exam to provide written documentation of an extenuating circumstance from a third party source. Extenuating circumstances include but are not limited to medical emergencies and funerals. No-shows to the CLVS exam who do not provide documentation of an extenuating circumstance will not receive a refund of their exam fee.

I HAVE READ THE ENTIRETY OF THIS FORM and I understand that the CLVS Production Test is designed for persons with a working knowledge of the standards of videotaping depositions:

Signature: _____ ID# : _____

Name (please print): _____ Office phone: (_____)_____

Mailing address: _____ Home phone: (_____)_____

_____ Fax: (_____)_____

Email address*: _____ * Your admission ticket will be sent to this address.

Time Selection - Please indicate your 1st, 2nd and 3rd choices of test times. Time preferences will be assigned on a first come first-served basis.

Fri., 09/25/2009, a.m. ____ Sat., 09/26/2009, a.m. ____ Sun., 09/27/2009, a.m.

Fri., 09/25/2009., p.m. ____ Sat., 09/26/2009, p.m. ____ Sun., 06/27/2009, p.m.

Payment (circle one): **Check** **Money Order** **Visa** **MasterCard** **Discover/NOVUS** **American Express**

Amount: \$ 300.00

Credit Card Info***: _____ Exp. Date: ____/____

Signature: _____ **Do not submit this form prior to July 20. Early forms will be returned unprocessed.**

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):
_____* For security reasons, please print your credit card billing address to the right, if different from mailing address.

MAILOR FAX THIS FORM BY JULY 31 TO: NCRA, 8224 OLD COURTHOUSE RD., VIENNA, VA 22182; FAX: (703) 556-6291