



American Payroll Association

Education Divisions — New York • San Antonio • Las Vegas

APA LEARNING CENTERS Payroll 101 Course and FPC Exam Registration Form

PAYROLL 101 COURSE REGISTRATION: (You must be registered for the PR101 course to take the FPC exam at an APA Learning Center) See complete course details at: <http://www.americanpayroll.org/product/6/63>

*Course Location: (select one) San Antonio, TX Las Vegas, NV Today's Date: _____

*Course Code #: _____ *Course Dates: _____

I am an APA MEMBER. Member's ID : _____ \$1,509

I am a COLLEAGUE of an APA Member (at the same street address) \$1,565
Colleague's ID # _____

Member's Name _____

Member's ID # _____

I want to join APA now and register at the member rate \$1,763

Class Registration Fee at Member Rate. \$ 1,509

Annual Membership Dues** \$ 219

One-time Membership Enrollment Fee. \$ 35

Total. \$ 1,763

I am not an APA Member or Colleague \$1,800

**Dues are subject to change without notice and are nonrefundable. Membership is on an individual basis; corporate memberships are not available. Members of the APA receive PAYTECH magazine as part of their annual dues of \$195, \$50 of which is allocated for their subscription to PAYTECH, which is nonrefundable there from. 100% of membership dues are deductible as an ordinary business expense.

Supervisor's Certification (REQUIRED FOR SAN ANTONIO TEXAS REGISTRATIONS):

I certify that _____ (registrant's name) registering for above named class is or will potentially perform tasks related to the payroll department.

Supervisor's Signature _____

Approved and regulated by the Texas Workforce Commission, Career School and Veterans Education Section, Austin, Texas. Authority for Data Collection: Texas Education Code, Section 132.055 and Texas Administrative Code, Section 807.1217(b)(2)(C), (D), and (E).

Planned Use of the Data: To provide evidence of receipt of that information which is required by law to be provided the student prior to enrollment.

Course Outline, Transfers, Substitutions, Hotel Accommodations: www.americanpayroll.org

Students with unresolved problems with the Payroll Learning Center may contact: (1) San Antonio location: Texas Workforce Commission, 101 E. 15th St., Austin, TX 78778-0001 or, (2) Las Vegas location: Nevada Commission on Postsecondary Education, 1820 E. Sahara Ave., Suite 111, Las Vegas, NV 89104. Any holder of this consumer credit contract is subject to all claims and defenses which the debtor could assert against the seller of goods or services obtained pursuant hereto or with the proceeds hereof. Recovery hereunder by the debtor shall not exceed the amounts paid by the debtor hereunder.

I have reviewed the course enrollment agreement and related materials (staff roster, course description, schedule and school policies, etc.) found at www.americanpayroll.org/SALC-policy and understand my rights and responsibilities as expressed in these documents.

Student's Signature: _____ **Date:** _____



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LEARNING CENTER - FPC EXAM REGISTRATION:

*APA ID # _____ *Exam Date: _____ Exam Fee : \$ 295.00

Ms. Mr. *First Name: _____ *Last Name: _____

*Pearson VUE ID: _____ (see instructions below; registrations submitted without a Pearson VUE ID will not be accepted)

Go to www.pearsonvue.com/apa

Click on the following button: Schedule Online

Click on the following link: create a new web account, if you don't already have one

Enter demographic information. Fields listed with an asterisk are required; this includes First Name, Last Name, Country Residence, Address, City, State, Zip Code, Telephone, and E-mail Address.

Once all of the demographic information is entered, click the next button at the bottom of the page.

You will then be prompted to create a username (one that is unique to the Pearson VUE system); once the username is confirmed, please write down your username.

Your temporary password will be e-mailed to you; once you log in for the first time, the system will auto-generate a more secure password.

Please note: Examinations will take place on Friday afternoon from 1-4 pm.

MAILING ADDRESS:

Organization: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

*Phone: _____ Fax: _____ *E-mail: _____

PAYMENT INFORMATION: (payment must accompany your order)

Course Fee: \$ _____ + Exam Fee: \$ 295.00 = Total Amount Due: \$ _____

I authorize the American Payroll Association to charge my: AMEX VISA MASTERCARD DISCOVER

Card #: _____

Exp. Date: _____ Card is: (check one) Corporate Personal

Name on Credit Card: _____ Signature of Cardholder: _____

Please fax this registration form to Membership Services at (210) 224-6038, or mail to APA, Attn: Membership Services, 660 North Main Avenue, Suite 100, San Antonio, TX 78205-1217. Please feel free to contact APA's Certification Department at (210) 226-4600 or e-mail apaexam@americanpayroll.org with any questions.

(*required for processing)

For Office Use Only:

Date: _____ Order #: _____ Batch #: _____ Group #: _____ Check #: _____ C/P: _____ Total \$: _____