

HRCI COURSE REGISTRATION FORM

(Please Print or Type)

Name: _____
Title: _____
Company: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Work phone: ____/____ Home phone: ____/____
E-Mail Address: _____

Which exam will you plan to take? PHR___ SPHR___

**Please include your payment (Check or Credit Card) with your registration.
Checks made payable to: LCHRMA**

Registration forms received without payment will not be processed.

Visa___ MasterCard___ Card #: _____
Expiration: ____/____
Signature: _____

Fees & Refund Policy: Fees include a student copy of the SHRM Learning System and study materials, including sample tests. The fee does **not** include exam registration. If you plan to attend the course in preparation for the HRCI National Exam, please be sure to confirm through HRCI that you meet the eligibility requirements. Registration for the National Exam is separate from the registration for this course. LCHRMA will not be held responsible for those who attend the course and are ineligible to take the exam. You should request a "Certification Information Handbook" regarding the National Exam from the HR Certificate Institute, at (866) 898-HRCI, or visit www.hrci.org. Participants who withdraw before 2/2/2010 will receive a refund minus the SHRM Learning System costs. No refunds will be given after class begins.