PRP Registration Form

Sitting Code

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Sponsor: Pacific Locksmiths Association

Date: Sunday, July 18, 2010 Time: 3:30 pm

Location: Ernie's Lock & Key – 605 E. 2nd St

City: The Dalles ST OR ZIP 97058

CANDIDATE (please type or print):

Last Name:

First Name: MI:

Address:

City: State: Zip

Work Phone:

Home Phone:

Previous Member Number (if applicable):

Email:

Have you ever taken the PRP/STPRP before? ☐ Yes ☐ No

MEMBERSHIP STATUS:

Application will not be accepted at the member rate without valid current membership number. Fill in Company Member Number if your company has an ALOA Company Membership.

- ☐ **ALOA Active Member Number:**
- ☐ **ALOA Company Member Number:**
- ☐ **SAVTA Member Number:**
- ☐ **Pending (Membership Application Attached)**
- ☐ **Non-member (ID number will be assigned)**

(Non Members must submit an application for and pass a background check and agree to abide by the ALOA Code of Ethics – separate forms available from the ALOA Certification department)

FORM OF PAYMENT:

☐ **Cash** ☐ **Check Number**

Credit Card Payment (choose one): **(Make checks payable to ALOA)**

☐ Visa ☐ MasterCard ☐ Amex ☐ Discover

(Name on Card)

(Card Number)

(Signature) **(Expiration Date)**

FEES: Locksmith PRP

☐ **ALOA Member** $ 65.00

☐ **Non-Member** $ 260.00

PRP Registration	$
Resource Guide @$25.00	$
CPS Prep Manual @$135.00)	$
Membership Dues	$
New Member Application Fee	$ WAIVED
Late Registration Fee ($10.00)	$
Total	$

RETURN THIS FORM WITH THE REQUIRED FEE TO:

ASSOCIATED LOCKSMITHS OF AMERICA, INC
3500 EASY STREET • DALLAS, TX 75247-6416
P-214-819-9733 x101 Email: certification@aloa.org

LEVEL TESTING FOR:

☒ **CAL**

Below are descriptions of each level and its requirements.

- CAL (A-00) Because of the time required this cannot be taken with any other selection.

Note: Application will be returned if choices are not indicated

Mark with an X to indicate your category choices.

	CAT#	Description
☒	A-00	Certified Automotive Locksmith (CAL)
		Only for this sitting

Form must be received at least **15 Days** before **Sitting Date.** *If paying by credit card, form may be faxed to:* **214-819-9429**