

South Carolina Green Industry Association
CERTIFIED NURSERY PROFESSIONAL TEST REGISTRATION FORM

Test Date: Friday, February 2, 2018
Location: Columbia Metropolitan Convention Center, Columbia, SC

Written Test: 9:00 - 11:00 AM, Lexington Room
Plant ID Test: 11:30 AM - 1:30 PM, Carolina Room

Application Date _____ Test Date 2/2/2018

YOUR NAME _____

Home Address _____

City, State, Zip _____

Phone _____

SCGIA Member? _____ email address _____

COMPANY NAME _____

Address _____

City, State, Zip _____

Phone _____

SCGIA Member? _____

Name as you want it to appear on SCGIA CNP Badge _____

Test Fee: SCGIA Members: \$25.00 Non members \$50.00

Retest Fee: (Either or both portions) Members \$15.00 Non Members \$25.00

Full time employees of a member firm are eligible for member rate, with firm's approval.

Fee amount enclosed \$ _____ If retest, give last test date _____

Please bring a pencil, clip board and calculator

Complete and return this form and appropriate fee to: SCGIA
4661 Crystal Drive
Columbia, SC 29206
Phone 803-743-4284 fax 803-787-2919

Deadline to register January 26, 2018

CNP Reg Form WORD