

Application/Order Form

To register, please complete the information below.

Full Name _____

Date of Birth ____/____/____ SS# ____-____-____

Phone _____

Address _____

Email _____

_____ **Home Study Pre-License Course/146 @ \$975.00. Each. Course.**

Select a payment method below. Please note--Registration fees are non-refundable.

_____ **check enclosed for \$** _____

_____ **Please charge \$986.35 each course to my credit card. (\$975. + \$11.35 postage)**

Type of card: MC ____ **Visa** ____ **Discover** ____ **AMEX** ____

CC# _____

Exp. _____ **CCV** _____ **3 digit security # on back of card**
4 digits on front for AMEX

Signature _____

Please sent this completed form along with payment to:
HIPQS Registration, 102 South Macoupin St., Gillespie, Il 62033

Registration also may be completed on line with your credit card OR by calling the HIPQS office at 217 839-3375.