

# One-Page AICI FLC Certification Registration Form

Please fill out this form and send it to AICI Headquarters to start your AICI FLC candidacy period. With this one-page registration form, include payment of \$100.00 US (\$400.00 for non-members), which will be non-transferable and non-refundable.

Name:
Address:
Fax:
Phone:
E-mail:
Website:
Date your payment was sent to AICI Headquarters:
Date and location you passed the AICI FLC Exam:
Completion date for materials to reach the AICI FLC Committee:

I understand that all my financial, proprietary and copyrighted material sent to the AICI FLC Review Committee will remain strictly confidential. Anyone violating that agreement will be reported to the Ethics Committee.

I understand that the decision of the AICI FLC Review Committee is final and that I may not enter into any discussion with the individuals involved beyond the official comments and recommendations made to me in the Review Report.

I understand that AICI is not responsible for any lost or stolen file, folder, letter, evaluation or piece of information that my clients or I send to AICI.

**I enclose payment for \$100.00 US** (\$400.00 for non-members) to open my AICI First Level Certification Candidacy period which will end one year from the date my payment is received by AICI.

On-line application will take electronic signature Signed: Date
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## Send or fax this Certification Registration and fee payment to:

Association of Image Consultants International (AICI)  
100 East Grand Avenue, Suite 330, Des Moines, IA 50309

EM: info@aici.org  
FAX: 1+ (515) 243-2049

**Payment:**  Check     Visa     MasterCard     American Express

Credit Card # \_\_\_\_\_ Expiration \_\_\_\_\_

CVV Code \_\_\_\_\_ Billing Zip Code \_\_\_\_\_