

Activity Director Certification Services

Mail original registration and **check or money order** payable to: **Theresa Thorland**
10509 390th Street
Thompson, IA 50478

Fax or email registration and **credit card** information to: 641-584-2870 / dtntt@wctatel.net

Call in credit card information to: **641-390-0223** Secondary: 641-590-2673

Credit Card #: _____ Expiration Date: _____

3 Digit Security Code #: _____ Credit Card Billing Zip Code: _____

Required Textbooks: Part 1~~~*Activities Keep Me Going & Going Volume A*
Mary E Miller Charles W. Peckham
Jennifer L. Krupa Arline B. Peckham

Part 2~~~*Activities Keep Me Going & Going Volume B*
Mary E. Miller Charles W. Peckham
Jennifer . Krupa Arline B. Peckham

Please select course format: Home Study: _____ On-Line: _____

Please select course and payment method:	Check/Money Order	Credit Card
MEPAP 2 nd Edition (Part 1 & Part 2):.....	\$850.00 _____	\$880.00 _____
including textbooks.....	\$960.00 _____	\$995.00 _____
Part 1 only:.....	\$500.00 _____	\$518.00 _____
including textbook:.....	\$555.00 _____	\$575.00 _____
Part 2 only:.....	\$500.00 _____	\$518.00 _____
including textbook:.....	\$565.00 _____	\$585.00 _____

Registration fee is non-refundable after 7 days from receiving payment. There will be a \$50.00 cancellation fee

Student Information

Name---Please print clearly _____

Street---Please print clearly _____

City, State, Zip---Please print clearly _____

Phone _____

E-mail---Please print clearly _____

Signature/Date _____

NCCAP Instructor Pre-approval #: NCCAP25121-17-M2-NT (Home Study) NCCAP31475-17-M2-NT (On-line)