



**Certified Construction Manager
Exam Registration Form**

Please complete the following information and return this form with your payment to CMCI. If you are paying by credit card, you may fax or email the form. **Please make sure that CMCI receives this form at least 48 hours prior to exam registration date.**

Examinee Contact Information			
Name		Phone Number	
Company			
Address			
Email Address			
Payment Information			
Please make checks payable to CMCI and allow 7 days for processing time. Payment in full must be received by the registration deadline for the selected location noted above.			
<input type="checkbox"/> 1 st exam attempt (\$275)	<input type="checkbox"/> 2 nd exam attempt (\$125)	<input type="checkbox"/> 3 rd exam attempt (\$125)	
<input type="checkbox"/> Cancellation fee (\$125)		<input type="checkbox"/> Reinstatement fee (\$125)	
Payment type	<input type="checkbox"/> Check	<input type="checkbox"/> AMEX	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
Name on Card			
Card Number			
Expiration Date		CVC	
Authorized Signature			
If Paying by Credit Card: Billing Address			
Billing City, State, Zip			

E-MAIL, FAX, or MAIL this form and payment information:

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