



## INTENT TO TEST FORM

This form is being submitted with the understanding and the approval of my mentor. I have met all the requirements defined by the Certified Clogging Instructor (CCI) program for testing eligibility and thus offer this notice of my intent to test for the designation of Certified Clogging Instructor at the National Clogging Convention in Dallas, TX., November 2011.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ email: \_\_\_\_\_

Mentor's Name: \_\_\_\_\_

Both Sessions Completed: Date: \_\_\_\_\_ Location: \_\_\_\_\_

Testing Fee is \$50 US and must be submitted with this form. After deadline \$65

Method of Payment: Check Money Order Credit Card

If using a credit card please complete the following

Master Card Visa American Express Discover

Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

\*\*\*\*Completed form should be mailed with payment made to C.L.O.G. prior to November 1, 2011 to:

Kathey Wilson, CCI Co-Chairperson  
296 CR 368  
Jonesboro, AR 72401