



## 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 Nashville, TN., November 2010.

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

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, 2010 to:

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