



Registration Exam Payment Form

Name: _____

Address: _____

City Prov/State Postal Code/Zip

Phone E-mail

Amount: _____

Please identify all applicable payments:

	Expense Item	Cost
<input type="checkbox"/>	Registration Exam Application Fee	\$50.00
<input type="checkbox"/>	Registration Exam Fee	\$250.00

Check the method of payment you are using:

Credit Card

Cheque (enclosed)

In order to process your payment by credit card please fill out the form below and email to info@opcanada.ca or fax to (613) 595-1155.

VISA Master Card

Card # _____ Exp Date: _____

Security Code: _____

Cardholder Print

Signature