

Certified Landscape Designer Exam Registration

Candidate Information		
First Name:	Last Name:	
Home Address:		
City:	Prov:	Postal Code:
Email (enter address for online tests):		
Phone Number:		
Employer Information		
Company Name:		
Address:		
City:	Prov:	Postal Code:
Email:		
Phone Number:	Fax:	
Provincial Association Member? Yes No)	
Sign here if you authorize your employer to have access to your scores:		
Experience/Education: Degree plus 3-year experience OR Diploma plus 4-year experience OR 6-year landscape design experience. Provide education and employment history (copy of degree, diploma or employer references) if requested.		
Exam Fees: CNLA Member: \$325 plus GST/HS	Т	Non-Member: \$425 plus GST/HST
Rewrites [Indicate section(s)] \$45 per section + GST/HST	Communication	Design
	Practice	Plant Horticulture
	Grading & Drainage	Landscape Construction
Sub-total: \$ GST/HST: \$	Total: \$	
PAYMENT: Payments must accompany registration; provide address associated with credit card; no invoices will be issued.		
Name on credit card:		
Visa Master Card Car	rd #:	Exp Date: /
Cheque (payable to CNLA)		CVV:
Address:		
City:	Prov:	Postal Code:
Email:		
Signature:		

Indicate if you require modified testing accommodations for written testing. All requests must be supported by a medical, social or educational institution requisition at time of registration.

*Cancellation Policy: Candidates have 30 days from the registration date to cancel their exam. Note: A 15% non-refunable fee will be applied upon cancellation











