



Exam Registration Form

for New Mexico Insurance Examinations

(New applicants must attach this form to license application)

Last Name	First Name	Middle Name	Social Security Number
Residence Address (Your address of legal residence is required)			Date of Birth
City	State	ZIP Code	Daytime Phone Number (including area code) ()
Employer (insurance company, if known)			Evening Phone Number (including area code) ()
E-mail address			Fax Number (including area code) ()

This form is Page 23 of the New Mexico Licensing Information Bulletin. We recommend you read the entire bulletin.

Series	Exam Title	Exam Fee	Total
18-25	Life	\$80	\$
18-26	Accident and Health	\$80	\$
18-27	Life, Accident and Health	\$80	\$
18-28	Property	\$80	\$
18-29	General Casualty and/or Surety	\$80	\$
18-30	Vehicle	\$80	\$
18-31	Property, Vehicle and Casualty	\$80	\$
18-33	Title	\$80	\$
18-34	Bail Bonds	\$80	\$
18-35	Crop	\$80	\$
18-36	Consultant's Life, Accident and Health	\$80	\$
18-37	Consultant's Property, Vehicle and Casualty	\$80	\$
First-Time Test Takers		Fee	
	Consultant License Fee	\$100	\$
	License Fee	\$30	\$
	Appointment Fee (\$20 per line of authority). Fee is applicable only if appointment form is included with license application. All solicitor applicants require an appointment.	\$20 X # of appts.	\$
		Total Fee	\$

By filing this registration, you assume full responsibility for exam selection. If you are unsure which exam is needed for the license you are seeking, resolve this question **before** you register. Exam fees are valid for 90 days from receipt by Prometric.

Note: Do not include the license or appointment fees for a retake test.

	+		+		=	
Exam Fee Subtotal	+	License Fee Subtotal	+	Appointment Fee Subtotal	=	Total Fee

Please remit your total exam and license fees to Prometric. Fees may be paid by cashier's check, company check, money order, Amex, MasterCard or Visa. Make checks payable to Prometric. **Personal checks and cash are not accepted. Registration fees are not refundable.** To pay by credit card, please complete the information below. You must mail this completed exam registration form, your licensure application and all appropriate fees to:

Prometric New Mexico Processing Center
2538 Camino Entrada, Suite 204
Santa Fe, NM 87507

Card Type (Check One) <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> AMEX	Card Number	Expiration Date
Name of Cardholder (Print)	Signature of Cardholder	