

California Notary 6-Hour Home Study Course Vendor # 603132

Home Study Course Registration & Identity Verification

Please **PRINT** your name as it is **PRINTED** on your driver's license and all other information.

First Name	Middle Name	Last Name
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Work or Home Address _____ **City, Zip** _____

Mailing Address (if different than above) _____

Email address _____

Valid State Drivers License / ID #, Passport # _____ **Exp Date** _____

Primary Contact Phone # _____ **2nd Phone #** _____

Are you renewing your Commission? What is your Expiration Date? _____ **1st renewal? Y N**

The identification information I have provided to AV Notary Network Home Study Course is true and correct and accurately identifies me.

Executed on date : _____ **at (city)** _____, **California**

(Signature of Student)

Please **fax a copy of your driver's license** or other valid ID to verify your Identity **after your class completion.**

Please **do not include your social security number to any Vendor** since it is not a requirement!

Your Registration form is kept under lock and key for 2 years from the date of completion, at which time will be destroyed. Your identity and privacy are extremely important to us and will never be shared, sold or duplicated in any manner.

There is no refund on the Home Study Course unless a written request is received prior to the delivery of the California Notary Home Study Course.

How did you learn about this Home Study class? Secretary of State Website _____ Google _____ Yahoo _____ Bing _____
Prior class _____ Newspaper _____ Mailer/Flyer _____ Referred by Co-Worker, or Friend _____ Other _____

You can register for this Notary 6-Hour Home Study Course by:

1. Faxing to 877-206-2556
2. By Electronically transmitting to jan@avnotary.com
3. By Personally delivering to instructor
4. By Mailing with payment to: PO Box 2090, Lancaster, Ca 93539

Email Study Materials _____ **\$ 35** **Mail Study Materials to above address** _____ **\$45**

I would like to add \$35 to take the State-Proctored test at AV Notary testing location. _____ **\$ 35**

Payed by: **Cash** _____ **Check # / M.O.** _____ **Credit Card** *VISA - MasterCard - Discover*

Name as it is on card _____ **CVC # on back** _____

Acct # _____ **Credit Card Billing Zip Code** _____

Expiration Date ___ / ___ / ___ **Signature** _____ **Today's Date** _____