



Exam Registration Form

for New Hampshire Insurance Examinations

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

This form is Page 39 of the New Hampshire Licensing Information Bulletin. We recommend you read the entire Bulletin.

Series	Exam Title	Exam Fee	Total
12-61	Producer's Life Insurance	\$79	\$
12-62	Producer's Accident and Health Insurance	\$79	\$
12-63	Producer's Life, Accident and Health Insurance	\$100	\$
12-64	Producer's Property and Casualty Insurance	\$100	\$
12-72	Producer's Title Insurance	\$79	\$
12-73	Public Adjuster	\$79	\$
12-75	Adjuster's Property and Casualty Insurance	\$100	\$
12-76	Adjuster's Workers' Compensation Insurance	\$79	\$
12-78	New Hampshire Life Insurance Laws and Regulations	\$79	\$
12-79	New Hampshire Accident and Health Insurance Laws and Regulations	\$79	\$
12-80	New Hampshire Life, Accident and Health Insurance Laws and Regulations	\$79	\$
12-81	New Hampshire Property and Casualty Insurance Laws and Regulations	\$79	\$
12-83	New Hampshire Adjuster's Property and Casualty Insurance Laws and Regulations	\$79	\$
12-84	Producer's Property Insurance	\$79	\$
12-85	Producer's Casualty Insurance	\$79	\$
12-86	Producer's Personal Lines Insurance	\$79	\$
12-87	Producer's Credit	\$79	\$
By filing this registration, you assume full responsibility for exam selection. Fees for these exams are not refundable and not transferable. If you are unsure which exam is needed for the license you are seeking, resolve this question before you register.			Total Fee \$

Fee may be paid by cashier's check, company check, money order, 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. Register online at www.prometric.com/newhampshire, call 800.869.6603 or fax this completed form to 800.347.9242.

To register by mail, send this completed form along with the appropriate fee to:

Prometric
 ATTN: NH Insurance Exam Registration
 1260 Energy Lane
 St. Paul, MN 55108.

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