



## 2025 AP Exam Registration Form

Student's First Name	
Student's Last Name	
Date of Birth	
Photo ID Type and Number	
Current School Attending	
Phone Number	
Email Address	

Indicate Which Exam(s) You wish to take	
Exam 1	
Exam 2	
Exam 3	
Exam 4	
Exam 5	
Exam 6	

- \* All students must provide us with **A government-issued Photo ID** and use this same ID on Exam day.
- \* The Registration Fee of \$275.00 per exam is **NON-REFUNDABLE** under any circumstances.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date