To be completed by Teacher or Exam Proctor ONLY.

Name ____________________________________________________________
AAPT ID _______________________

School _________________________________ CEEB Number _______________________

Street Address __________________________________________________________

City, State, Zip __________________________________________________________

Country (if not USA) ______________________________________________________

Phone __________________________________ Fax ______________________________

School Email Required* ________________________________________________

Other Email ____________________________________________________________

Ship printed materials to ___School address above ___School Distribution Center (add address below)

School Distribution Center ______________________________________________

Street Address __________________________________________________________

City, State, Zip __________________________________________________________

Country (if not USA) ______________________________________________________

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Step 1. Register your school

___Teacher is an AAPT Member – $25

___Teacher is NOT an AAPT Member – $35

Step 2. Choose Exam Type

___WebAssign ($4 per student)

___Downloadable PDF ($8 per student)

Step 3. Indicate number of students participating

Number of Students ________

Use WebAssign for Practice Exams

For instructions on how to use WebAssign for practice (or for printable exams), go to

http://www.aapt.org/physicsteam/registration.cfm

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Payment Information. If paying by credit card, you will need to register online.

___ Check Enclosed ___________________________ Check Number

___ Purchase Order ___________________________ P.O. Number

A copy of the purchase order must be submitted with this form.

School Registration Fee $__________

Number of Students x Cost per Exam $__________

Processing Fee $ 10.00

Total Amount Enclosed $__________

Mail form to: AAPT U.S. Physics Team, One Physics Ellipse, College Park, MD 20740-3845