

**National LPN/VN Certification
Registration**

Name: _____
Address: _____
City: _____
State / Zip: _____
Phone: _____
Email: _____
SSN: _____
NFLPN Membership #
(if applicable): _____

Examination

- Gerontology Certification
- IV Therapy Certification

Cost

- \$175 Fee for Non-members of the NFLPN*
* \$55 of the tuition will automatically enroll
you as a member of the NFLPN
- \$120 Fee for NFLPN Members
- \$105 Renewal Fee

Method of Payment

Check American Express MasterCard Visa

Credit Card # _____
Expiration Date _____
Signature _____

Make Check Payable to:

Educational Resources, Inc.

Mail Fees and Required Forms to:

ERI
8910 W 62nd Terrace
Shawnee Mission, KS 66201

Fees are not refundable.

Review is CD Format

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