Irrigation Association
North America Certification Exam Registration
North America includes the United States (and Puerto Rico), Canada & Mexico

PLEASE USE THIS FORM TO REGISTER FOR ALL IA EXAMS.

- The Certification Candidate Handbook contains all relevant information about IA exam preparation, including references and content outlines.
- Exam application and registration is required at least 14 days prior to exam date. A late fee of $25 will be assessed for any paper/pencil exam registrations received less than 14 days before the exam date. On-site registration is not allowed.
- The IA reserves the right to cancel, postpone or reschedule any or all exams as necessary.

CANDIDATE INFORMATION – HOME

NAME
ADDRESS (NO PO BOXES)
CITY STATE/PROVINCE POSTAL CODE
PHONE EMAIL (REQUIRED)

EXPERIENCE: Depending on the certification exam you plan to take, the IA recommends candidates have six months to three years of irrigation-related experience. Filling out your irrigation-related experience below is optional.

CANDIDATE INFORMATION – WORK

NAME
ADDRESS (NO PO BOXES)
CITY STATE/PROVINCE POSTAL CODE
PHONE EMAIL (REQUIRED)

Preferred Shipping Address: ☐ Home  ☐ Work

Certification Code of Ethics

I subscribe to the following code of ethics and will:

- uphold the integrity of the irrigation industry.
- protect public health and safety.
- comply with all local, regional, and national laws and regulations.
- adhere to the concepts of free enterprise.
- follow fair and honest business practices, including legitimate representation of my personal capabilities, experience, certifications and licenses.
- apply ethical practices to all contractual and warranty obligations.
- use responsible procedures in the design, installation, management and maintenance of irrigation systems.
- promote best management practices for water, soil and energy through efficient and cost-effective irrigation system design, installation, management and maintenance.
- work to gain respect and recognition for the irrigation industry at the local, regional, national and international level.

Declaration:

- I declare that the information contained in this application is true and accurate.
- I understand that falsification is grounds for revocation of certification.
- I understand that I am required to respond to an audit of my CEUs, if selected.
- I have read and agree to follow the certification code of ethics.
- I understand that failure to adhere to the certification code of ethics may result in disciplinary action up to and including revocation and/or exclusion from the certification program.

Acceptance of the code of ethics is required for approval.

SIGNATURE
DATE
### PRACTICE EXAMS (PRACTICE EXAM FEES ARE NONREFUNDABLE)

<table>
<thead>
<tr>
<th>Practice Exam</th>
<th>Member Fee With Exam Purchase</th>
<th>Member Fee Without Exam Purchase</th>
<th>Nonmember Fee With Exam Purchase</th>
<th>Nonmember Fee Without Exam Purchase</th>
<th>Total</th>
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<td>Practice Exam – Landscape Irrigation Auditor</td>
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<td>$75</td>
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<td>Practice Exam – Irrigation Contractor</td>
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<td>$75</td>
<td>$75</td>
<td>$100</td>
<td>$400</td>
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</tbody>
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### EXAM FEES

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<th>Exam</th>
<th>Member Fee</th>
<th>Nonmember Fee</th>
<th>Retake Fee Member</th>
<th>Retake Fee Nonmember</th>
<th>Total</th>
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<tbody>
<tr>
<td>Certified Landscape Irrigation Auditor</td>
<td>$250</td>
<td>$495</td>
<td>$200</td>
<td>$325</td>
<td>$650</td>
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<tr>
<td>Certified Landscape Irrigation Auditor – Drip</td>
<td>$150</td>
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<tr>
<td>Certified Golf Irrigation Auditor</td>
<td>$250</td>
<td>$495</td>
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<tr>
<td>Certified Irrigation Contractor</td>
<td>$250</td>
<td>$495</td>
<td>$200</td>
<td>$325</td>
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<tr>
<td>Certified Irrigation Technician</td>
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<td>Certified Irrigation Technician - Spanish</td>
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<td>Certified Landscape Water Manager</td>
<td>$250</td>
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<td>Certified Agricultural Irrigation Specialist</td>
<td>$200</td>
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</tbody>
</table>

Certified Irrigation Designer

- General Landscape/Turf Exam
- Specialty Commercial (L/T)
- Specialty Golf Course (L/T)
- Specialty Residential (L/T)
- General Agriculture Exam
- Specialty Drip/Micro (AG)
- Specialty Sprinkler (AG)

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**Late Fee:** A late fee of $25.00 will be assessed for any paper/pencil exam registrations received less than 14 days before the exam date.

**Refund Policy:** Upon request prior to exam, refunds will be given to candidates minus a $75 administration fee.

**Cancellation Policy:** Exam cancellations must be made in writing at least five business days prior to exam date. Cancellations made after this date will be assessed a cancellation fee. If a candidate fails to appear on the day of the exam, the candidate will forfeit all exam fees and will not be eligible for a refund.

- Paper/Pencil Exam Site ___________________________ Exam Date: ____________________ -OR- Computer-based Testing

### REFERENCES

Prices are subject to change without notice.

**Member Nonmember**

- $55  $75 Landscape Irrigation Auditor (CLIA)
- $50  $68 Golf Irrigation Auditor (CGIA)
- $66  $90 Landscape Irrigation Contractor (CIC)
- $50  $68 Irrigation System Installation & Maintenance (CIT)
- $66  $90 Principles of Irrigation (CIC, CID, CLWM)
- $153  $205 Irrigation, Sixth Edition (CIC, CID, CLWM)
- $41  $55 Landscape Drip Irrigation Design & Management
- $48  $54 Agriculture Irrigation Management (CAIS)
- $129  $134 Drip and Micro Irrigation for Trees, Vines and Row Crops (Specialty Drip/Micro)

**Shipping:** Shipping fees are subject to change without notice. Please contact the IA for international shipping. International customs and duties are the responsibilities of the customer.

- $12 to ship one book USPS Priority Mail in the United States
- $14 to ship *Irrigation, Sixth Edition*
- $2.50 for each additional book

### PAYMENT INFORMATION

Name ____________________________

- $ ______ Exam Fees
- $ ______ Late Fee (if applicable)
- $ ______ Cost of References
- $ ______ Shipping Cost

- $5.00 Handling (book orders only)
- $ ______ Total in U.S. dollars

- Check here for a receipt.

Check #: ________________________


**CHARGE:** □ VISA □ MasterCard □ American Express

CARD NUMBER: ________________________________

NAME ON CARD: ____________________________

EXPIRATION DATE (MONTH/YEAR)________________

SIGNATURE: ________________________________

DATE: __________

Please note: By submitting this form you acknowledge your credit card will be charged the correct fees according to IA membership records.