



Holland High School
600 Van Raalte Avenue
Holland, MI 49423
(616) 494-2200

Holland High School AP Exam Registration Form

Student Name: _____ **Grade:** _____

I would like to register my child for the following AP exams at the cost of \$97 per exam. If I meet the eligibility requirements for a fee waiver, that cost is \$20 per exam. Please list exam(s) below:

Name of AP Exam	Exam Cost
Exam Total	

Method of payment: Cash Money Order Check # _____

*Checks should be made payable to **Holland High School Advanced Placement.**

Eligible for a fee waiver as my child is qualified for the Free/Reduced Lunch program (\$20 per exam).

Eligible for testing accommodations from a 504 plan or IEP plan.

Parent Signature: _____ **Date:** _____

Please return this form and payment to HHS Athletic Office or mail it directly to Holland High School, 600 Van Raalte Avenue, Holland, MI 49423 c/o Mrs. Bethany Nichols **by Friday, November 11, 2022.**