The Institutes
DESIGNATIONS™

2025 Registration Form

To register for an Institutes Designations exam, complete and return this form with either credit card information or the necessary fees (U.S. currency only). Do not use this form to register for AAI segmented exams offered through state associations.

Telephone: (800) 644-2101 or (610) 644-2100 **Fax:** (610) 640-9576 **Email:** CustomerSuccess@TheInstitutes.org **Web:** TheInstitutes.org

1. Student ID number (if assigned):_____

If you need a student identification number, please call Customer Success at (800) 644-2101**. If you are requesting a NEW ID #:**

- Check with your employer first. Requesting a new ID is not available for some companies. A new ID number may also delay employer reimbursement or incentive payments.
- Creating a new ID may result in exam grades being improperly recorded. Always check your grades after changing your ID.

2. PRINT your full name as it appears in your Institutes account.

_____

Last

_____

First **MI**

3. If you have previously registered for an exam under a different name, please print that name.

_____

Last

_____

First **MI**

4. Date of birth: _____

5. Job title: _____

6. Phone number: _____

7. Email address: _____

☐ **Check here if you would like to receive emails.**

8. Employer's name: _____

9. Employer Type (select one):

☐ Insurance company
☐ Agency
☐ Miscellaneous
☐ Agency-Managing General
☐ Ind Service, TPA, Consult
☐ Government/Public Entity
☐ Educational Institution
☐ Brokerage
☐ Adjuster
☐ U/C General Agency
☐ Agency-Exclusive
☐ Risk Mgmt in Non-Insurance
☐ Professional/Trade Org
☐ Accounting Firm
☐ Law Firm/Attorney

10. Preferred mailing address: ☐ Home ☐ Business

_____
Address

_____
City/State/Zip

_____
Province/Country

11. What program are you working toward? _____

12. Indicate the exam number and testing window for registration:

Exam Number (e.g. AINS 101 or AAI 301A)	Testing Window (e.g., Oct 15 - Dec 15, 2025)

13. CE Credit (Check applicable license):

☐ **Producer** ☐ **Adjuster** ☐ **None**

License/NPN #_____

Resident State_____

License Expiration Date_____

14. Payment: (See Exam Fee Chart)

Exam Fee	$
Credit Available	-$
Total Remittance	$

If paying by check, please make payable to The Institutes.

For corporate invoicing, provide the billable account code.

Account Code: _____

Return this form with fee or payment information to:

The Institutes
720 Providence Road, Suite 100
Malvern, PA 19355-3433
Fax: (610) 640-9576

Credit Card number: _____
(American Express, Diners Club, Discover, MasterCard, and VISA cards are accepted.)

Expiration date: _____**CSV:**_____

Billing address zip code: _____

Signature: _____

For accounting use only

Date Received_____ Amount_____ Account #_____

Institutes Designations Exam Fees

Full Exam	Early Discount Virtual *	Standard Virtual	Virtual Retake**
CPCU	$ 349	$ 429	$ 349
AINS, AIO, AIS	$ 239	$ 319	$ 239
ACRM, ACRR, AIC, AIDA, API, ARe, ARM, AU, PBP, WCCA	$ 249	$ 329	$ 249
AFSB, AIAF, AIM, AIT, AMIM, ANFI, APA, ASLI, ARC, SPPA	$ 309	$ 389	$ 309
ACSR, AAI	$ 209	$ 289	$ 209
PRC	$ 209	$ 289	$ 209
AGPI, AIRP	$ 159	$ 239	$ 159
SM	$ 159	$ 239	$ 159
CAS	n/a	$ 475	n/a
Segmented Exams			
AAI 301, 302, 303 (A, B)	$ 165	$ 245	$ 165
Transfer/Cancel			
Transfer fee	$ 95		
Cancelation Forfeiture	$ 145		

For more information on testing windows, exam transfers and retakes, common FAQs, exam formats, rules and standards, virtual proctoring, and more, go to https://web.theinstitutes.org/exam-information. You may also reach out to CustomerSuccess@TheInstitutes.org for any exam questions or support.

* Early fees are charged before the first day of the testing window for which an examinee is registering.

** The virtual retake discount applies to exams taken in the same window.

Course topics, program and exam requirements, and pricing are subject to change at any time.