

Association of Social Work Boards Social Work Registry P.O. Box 1508 Culpeper, VA 22701

Registry Application Payment		
Identification/Contact Information		
Name:		
Social Security Number:		
Address:		
Email Address:		
Phone Number:		
Fees: ☐ Student verification @ \$35.00 (currently enrolled at: ☐ General verification \$60.00)	
Payment Method (Check one): ☐ Visa ☐ Check/money order (payable to ASWB Social Work ☐ MasterCard ☐ Discover ☐ Discover ☐ Will be held until funds have cleared.		
Credit Card Number:	* Please do NOT email this form! Fax to: 540.423.3682 Mail to: ASWB SW Registry P.O. Box 1508	
Expiration Date: CID #:	Culpeper, VA 22701	
Cardholder's Zip Code:		
Cardholder's Name (Please print):		
Cardholder's Signature:		
Returned checks will be assessed a \$25 fee. Verification will be suspended until a cashier's check or money order covering the original fee plus the \$25 fee is received. * For your protection, emailed payments will NOT be processed.		