

Regional Training Center
 Western Oregon/SW Washington
 Painters, Drywall Finishers & Allied Trades
 12687 NE Whitaker Way ♦ Portland, OR 97230
 503-287-4856 (phone) ♦ 503-258-1767 (fax)
 www.paintertraining.org

RELATED TRAINING REGISTRATION FORM

Last Name _____ First Name _____
 Address _____
 City, State, Zip _____
 Phone (____) _____ Soc Sec # (last 4) _____
 Employer _____ Local Union # _____
 Trade: Painter Taper Other

CLASS DATE	COURSE TITLE	TIME OF CLASS	LOCATION	CREDIT HOURS

In signing this form I understand that:

1. I will be charged a \$25.00 fee for a class I register for but do not attend, and I will not be able to attend future classes until any fees I owe are paid. I will not be charged if I cancel at least 24 hours in advance of the class start time.
2. I will not receive partial credit for 8 or 16 hour courses. If I miss one class of 24, 32 or 40 hours I will not receive credit until I make up the time at the instructor's convenience.
3. Classes start promptly at the scheduled time, and late arrivals will need to reschedule.
4. Classes may be canceled if fewer than four people have registered by 48 hours prior to starting time. Office will attempt to notify registrants by telephone, but registrants can check status on recorded message or website.
5. Walk-ins are permitted, if space is available due to cancellations or no shows. Identify yourself to the instructor so a registration form can be completed.

Term: Fall Winter Spring

(Office Use Only)

Date Received

Signature _____