

**Regional Training Center**  
 Oregon and Southwest Washington  
 Painters, Drywall Finishers & Allied Trades  
 13521 NE Whitaker Way ♦ Portland, OR 97230  
 503-287-4856 (phone) ♦ 503-258-1767 (fax) ♦ [RTC@pattt.org](mailto:RTC@pattt.org) (email)  
[www.paintertraining.org](http://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  Drywall Finisher  Other

*You may list up to five classes or attach another sheet*

CLASS DATE	COURSE TITLE	TIME OF CLASS	LOCATION	CREDIT HOURS

**By signing this form I acknowledge that I have read and understand the following:**

1. I will be charged a \$25.00 fee for a class I register for but do not attend. **All other classes I pre-registered for will be canceled**, and I will not be allowed to attend future classes until the fees 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 classes held over multiple days; I must attend all sessions to receive the credits (the schedule will say "must attend all for credit").
3. Classes start promptly at the scheduled time and late arrivals will need to reschedule.
4. Classes will be canceled if fewer than **SIX** people have registered by 24 hours prior to starting time. The office will attempt to notify registrants by telephone, but registrants can also check for updates on the [www.paintertraining.org](http://www.paintertraining.org) home page.
5. Due to the minimum requirement to hold a class, **walk-ins** are NOT permitted and I must pre-register.

Term:  Winter  Spring  Fall

*(Office date stamp only)*

**Date Received**

Your Signature \_\_\_\_\_