

Registration for RRP Class

Date of class: _____ Location: _____ Instructor: _____

PRINT LEGIBLY!

Enter your name as you want it to appear on your Renovator Certificate.
 Your certificate will be emailed to you, so email is important. If you have
 no email, your certificate will be mailed to you.

Name			
	First	Middle	Last

Address	
	# Street

	City	State	Zip

Email	
Company	
Birthdate	
Office Phone	
Fax	
Cell	