



Knowledge CollegeTM

Registration Form

Class desired,
select drop down
menu to choose
class :

Date:

STUDENT

Social security (Last 4 Digits)

I-CAR number (required for I-CAR credit)

First name :

Last name :

Address :

City : State : Zip Code :

Mobile phone:

email address:

use personal email address

email needs to be legible and correct

COMPANY / EMPLOYER

Name:

Address :

City : State: Zip code:

email address: Phone:

DISTRIBUTOR

Distributor name:

Address :

City: State :

email address: Phone:

Send completed form to:
ppgrefinishtraining@ppg.com

PPG Refinish Training
Phone (800) 647-6050

PPG Representative Name:

You will receive instructions once your REGISTRATION has been processed.