



313 Warwick Ave, Cranston, RI 02905 • rimpa.org

Plumbing Apprentice School Registration 2018-2019 1st Semester

PLEASE PRINT CLEARLY
STUDENT INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email Address***required for school communications** _____

Apprentice License # _____ Date Issued _____

Years of Plumbing School Completed _____

Plumbing School Attended _____ Hours _____

Plumbing School Attended _____ Hours _____

Signature _____

Date _____

EMPLOYER INFORMATION

Company _____

Address _____

City _____ State _____ Zip _____

Master Plumber _____ Lic # _____

Member RIMPA YES _____ NO _____ APPLIED FOR _____

PAYMENT (RIMPA USE ONLY)

Date _____ Amount _____ Received By _____