LOUISIANA USED MOTOR VEHICLE COMMISSION
3132 Valley Creek Drive
Baton Rouge, Louisiana 70808
MAIN# (225) 925-3870 FAX # (225) 925-3869
www.lumvc.louisiana.gov

EDUCATIONAL TRAINING SEMINAR REGISTRATION

(Please print or type)

IMPORTANT: A separate registration form must be completed for each person attending.

1. Trade Name of Business: _____

2. Ownership: _____

3. Dealer Number (If Applicable): _____

4. Physical Address: _____
   (Street) (City) (Parish) (Zip)

5. Mailing Address: _____
   (If different from Physical) (Street/P.O. Box) (City) (Parish) (Zip)

6. Business Phone #: _____ Mobile Phone #: _____

7. Fax #: _____ Email Address: _____

8. Person Attending:

   _____ _____
   Name Title

(Do not write below this line)

FOR OFFICE USE ONLY

Course Completed: Yes ____ No _____

Certificate Issued: Date: _____

Certificate Number: _____