

# September-BMV Trainings

- Choose Classes
- Complete Page 3
- Submit

**N. Yarmouth:** N. Yarmouth Community Center  
120 Memorial Highway

**Houlton:** Fire Station Training Room  
99 Military St. (Route 2)

2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
5	6	7	8	9	10	11
12	13	<b>14</b> <b>New Reg Part 1</b> <b>9-1pm</b> N.Yarmouth	<b>15</b> <b>New Reg Part 2</b> <b>9-1pm</b> N.Yarmouth	<b>16</b> <b>Truck</b> <b>9-1pm</b> N.Yarmouth	17	18
19	20	<b>21</b> <b>Limited New</b> <b>9-1pm</b> Houlton	<b>22</b> <b>New Reg Part 1</b> <b>9-1pm</b> Houlton	<b>23</b> <b>New Reg Part 2</b> <b>9-1pm</b> Houlton	24	25
26	27	28	29	<b>&amp;</b> <b>Truck</b> <b>1:30-4:30 pm</b> Houlton		

# October-BMV Trainings

- Choose Classes
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**Belfast:** Belfast Boathouse  
34 Commercial St.

**Rumford:** Municipal Bldg.  
145 Congress St.

2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	<b>20</b>	<b>21</b>	<b>22</b>	23
			<b>New Reg Part 1 9-1pm Belfast</b>	<b>New Reg Part 2 9-1pm Belfast</b>	<b>Truck 9-1pm Belfast</b>	
24	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	29	30
	<b>Limited New 9-1pm Rumford</b>	<b>New Reg Part 1 9-1pm Rumford</b>	<b>New Reg Part 2 9-1pm Rumford</b>	<b>Truck 9-1pm Rumford</b>		

**ENROLLMENT FORM**

Name of Municipality or Non Govt Entity: \_\_\_\_\_

Municipality or Non Govt Entity Phone #: \_\_\_\_\_ Municipality or Non Govt Entity Fax #: \_\_\_\_\_

Municipality or Non Govt Entity Email: \_\_\_\_\_

Municipality or Non Govt Entity Official: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature Required) (Agent, Tax Collector, etc.)

**Person Who Will Be Attending Training(s)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Suffix: \_\_\_\_\_  
(Please Print) (Please Print Legal Name)

Date of Birth: \_\_\_\_\_ Starting Date of Employment: \_\_\_\_\_  
(MM/DD/YYYY) (MM/DD/YYYY)

Attendee's Title with the Municipality or Non Govt Entity. Agent  Tax Collector Clerk  Selectman  Other \_\_\_\_\_

Is attendee's contact information different from above?  YES NO  
If yes, please provide the current contact information for the attendee.

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

The Bureau of Motor Vehicles Procedures Manual is available on the Maine Municipal Association website to view and print. Please use the link to access the manual. <http://www.memun.org/members/> .

To access our posted training dates and enrollment forms on the State of Maine website, please use the following link: <http://www.maine.gov/sos/bmv/municipal/index.html> .