



American Heart Association

BLS for Healthcare Providers

Mondays in 2010

5:30 pm - 9:30 pm

FEE: \$45 class plus \$15 textbook= \$60

Make check payable to: The CPR Lady

Receive AHA Card Day of Class!!

AVAILABLE DATES 2010

January 11	April 12	July 12	October 11
January 18	April 19	July 19	October 18
January 25	April 26	July 26	October 25
February 8	May 10	August 16	November 15
February 15	May 17	August 23	November 22
February 22	May 24	August 30	November 29
March 15	June 14	September 13	December 13
March 22	June 21	September 20	December 20
March 29	June 28	September 27	December 27

Schedule and fees subject to change without notice. On-site registration \$60 if space available

Register Early!

Schedule subject to change without notice. Enrollment is limited. Classes fill-up quickly.

Book Required!

All students must have a current book--*AHA BLS for Healthcare Providers Student Manual* (80-1010 2/06 – located on back of cover), which must be brought to the class:

1. Purchase book from The CPR Lady for \$15. Book may be picked up prior to class, but **WILL NOT BE MAILED**.
2. Bring current book.

Confirmation by Email!

Class confirmation, directions and study guide are sent by email. Book is NOT mailed.

Call or Email! 949.651.1020

THE CPR LADY - Helen McCracken RDH, MS
Helen@TheCPRLady.net

CEUs Available!

CEUs available to EMTs, Paramedics, Dentists, Dental Assistants, and Dental Hygienists

Provider Class Includes:

- ♥ 30 Compressions: 2 Ventilations
- ♥ One-Rescuer CPR (adult, child, infant)
- ♥ Two-Rescuer CPR (adult, child, infant)
- ♥ AED – Automated External Defibrillator
- ♥ Foreign Body Airway Obstruction (adult, child, infant)

Use of American Heart Association materials in an educational course does not represent course sponsorship by the American Heart Association. Any fees charged for such a course, except for a portion of fees needed for AHA course materials, do not represent income to the Association.

REGISTRATION FORM BLS for Healthcare Provider

Name _____
(Print clearly)

Address _____

City/State/Zip _____

Email _____

Phone # _____

Check must be enclosed when you send your registration form
Pre-registration including book \$60

2010		
<input type="checkbox"/> January 11	<input type="checkbox"/> May 10	<input type="checkbox"/> September 13
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Schedule and fees subject to change without notice

Make check payable to The CPR Lady

Mail this form and your check to:

THE CPR LADY ♥ 12 Spoonbill ♥ Irvine ♥ California ♥ 92604-4522 ♥ 949.651.1020