Sign up for a CPR class

One page about you and your class, one about the fee and our policy. Please print your name as it should appear on your card.

Questions marked * are required.

Completed by _____ Date _____

1 You and your course

Why we ask: So we bring the right materials and print your card correctly.

1. **Which course would you like? ***

   Tick one.

   - ◯ CPR and AED
   - ◯ CPR, AED and first aid
   - ◯ Pediatric CPR and first aid
   - ◯ BLS for healthcare providers
   - ◯ Not sure, please help me choose

2. **Full name as it should appear on your card ***

   _____

3. **Email ***

   _____

4. **Phone**

   _____

5. **Is this your first course or a renewal? ***

   Tick one.

   ◯ First course ◯ Renewal

6. **Are you under 18? ***

   Tick one.

   ◯ No ◯ Yes

If you chose “Yes” in question 6.

7. **Parent or guardian name**

   _____

If you chose “Yes” in question 6.

8. **Parent or guardian phone**

   _____

2 Fee and policy

Why we ask: So the fee and our policy are clear before class day.

9. **Do you need a student manual?**

Tick one.

- ◯ Yes, please add one
- ◯ No, I have one

> **Need an accommodation for the hands-on practice? Please call or email us before class and we'll talk it through. Our class policy: [your refund or credit policy]. (Edit this paragraph to match your own policy.)**

10. **Class policy ***

Tick to confirm.

- ☐ I've read the class policy

You're signed up

We'll email you the class details. Please arrive ten minutes early.