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.