

International Trauma Life Support Original and Refresher Class

Registration Form

Original: _____

Thursday, April 12, 2012
6:00 pm – 10:00 pm

Saturday, April 14, 2012
8:00 am – 5:00 pm

Sunday, April 15, 2012
8:00am – 5:00 pm

Refresher: _____

Thursday, April 12, 2012
6:00 pm – 10:00 pm

Sunday April 15, 2012
8:00am – 5:00pm

Provider Level: ALS _____ BLS _____

Cost

(non-refundable but transferable)

Original Students - \$150.00

Refresher Students - \$75.00

(Includes Book, Card and Breaks/Lunch)

Name: _____ Telephone No.: () _____

PLEASE PRINT

Address: _____

_____ State: _____ Zipcode: _____

Method of Payment

(MUST ACCOMPANY REGISTRATION)

_____ Check (make check payable to “Finger Lakes Regional EMS Council”)

_____ Credit Card (please complete reverse side of registration)

Return to :

Finger Lakes Regional EMS Council
63 Pulteney Street
Geneva, NY 14456

REGISTRATION DEADLINE: FRIDAY MARCH 23, 2012

