

Basic Life Support (CPR Certification)

July 14; August 11; September 15 9:30 a.m. - 11:30 a.m. or 1:00 p.m. - 3:00 p.m. \$20.00 / person Open to AHCA Members in Good Standing Only



Includes: AHA Healthcare Provider Professional (BLS) CPR/AED Course Completion Card

> **Instructor:** Jessica Denney, RRT

For more information, please contact Lori Kindy, Director of Education, 501-374-4422, lkindy@arhealthcare.com

1401 W. Capitol Avenue, Suite 180, Little Rock, AR 72201

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Please Check One:						
July 14 🗌 9:30 a.m 11:30 a.m. 🗌 1:00 p.m 3:00 p.m.						
August 11 🗌 9:30 a.m 11:30 a.m. 🗌 1:00 p.m 3:00 p.m.						
Sept. 15 🗌 9:30 a.m 11:30 a.m. 🗌 1:00 p.m 3:00 p.m.						
AHCA Training Room, 1401 W. Capitol Ave., Suite 175						
\$20.00 / person						

Open to AHCA Members in Good Standing Only

To register, send this completed form and payment to: Mail: 1401 W. Capitol Ave., Suite 180, Little Rock, AR 72201 / Fax: 501-374-1077 / Email: Ikindy@arhealthcare.com The information contained herein, together with all attached documents, will be regarded as property of AHCA.						
First Name	M.		Last Name		Last 4 digits of SSN	
Home Address			City	State	Zip	
Cell Phone			Email Address (to receiv	e confirmation, class info	ormation, and notifications)	
Employer			Current Title			
Employer's Address			City	State	Zip	
Attendee's Signature					Date	
PAYMENT TOTAL: \$						
Check #:	Visa	Master Card	American Express			
Name on Card:			Credit Card Number: _			
Expiration Date:			V-Code:			
Billing Address:						
City:			State:	Zip:		
Email Credit Card Receipt to:						

SPACE IS LIMITED. ADVANCED REGISTRATION IS REQUIRED. PAYMENT DUE BY FIRST DAY OF CLASS. CONFIRMATION WILL BE SENT.

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