

**ADVANCED CARDIAC LIFE SUPPORT RENEWAL COURSE**

**UVA Health System, Charlottesville, Virginia**

**Non-UVA Registration Form**

**Course Date:** (fill in dates) **1<sup>st</sup> Choice** \_\_\_\_\_ **2<sup>nd</sup> Choice** \_\_\_\_\_

**Name (Print):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone#:** \_\_\_\_\_ **Date of Birth (mm/dd/yy)** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Check One:**

**MD**    **RN**    **EMT-I**    **EMT-P**    **Resp Therapy**    **Other (specify)** \_\_\_\_\_

**Check here if you are with TJEMS** \_\_\_\_\_ **Name of Squad** \_\_\_\_\_ (Call 434-982-1766 for fee.)

***Course Prerequisites:***

The Life Support Learning Center requires participants to have a **current CPR card**. **The following course card is approved: American Heart Association – BLS for Healthcare Providers (HCP)**. (Attach copy, front & back of CPR card.) Course materials will be mailed to the above address as soon as registration forms and payment are received.

***Registration Fees:***

Fees: \$140.00 MD

\$120.00 Non MD

***Cancellation/Refund Policy:***

All checks should be made payable to the University of Virginia, Life Support Learning Center. Registration is on a first come, first served basis. The registration fee will be refunded minus a \$25.00 administrative fee, **if cancellation is received 10 business days prior to the course. No refunds will be issued to registrants withdrawing after that date. Substitutions may be permitted up to 5 business days prior to the course. No substitutions can be made after that time.** The American Heart Association strongly promotes knowledge and proficiency in BLS, ACLS, and PALS and has developed instructional materials for this purpose. Use of these 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 material, do not represent income to the Association.

**I have read and understand the cancellation policy as stated:**

**Signature:** \_\_\_\_\_

**It is imperative that you have thoroughly read and understand the resource material provided.**

<p><b><i>Mailing Address:</i></b> Life Support Learning Center Box 800309 UVA Health System Charlottesville, VA 22908-0309 Telephone: (434) 924-1765 Fax: Outside UVA (434) 243-2906 Inside UVA 3-2906</p>	<p><b><i>Physical Address:</i></b> 1222 JPA (old Towers Bldg.) 5<sup>th</sup> Floor, Room 5606 (For Picking Up Books!)</p>
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**Special Needs**

The 1990 American Disabilities Act requires that all individuals, regardless of their disabilities, have equal access. The Life Support Learning Center is pleased to assist participants with special needs. Requests need to be made in writing at least 14 working days before the course.