

Thank you for your interest in the Pediatric Advanced Life Support (PALS) Provider courses conducted by the EMSLRC.

Course Pre-Requisites

BLS for Health Care Providers: Although we do not require proof of Basic Life Support (BLS) certification before registration, we expect you to be proficient in BLS before participating in this course. Your BLS skills will be evaluated during the PALS clinical cases, so please be familiar with the American Heart Association BLS guidelines. **SUCCESSFUL COMPLETION OF PALS DOES NOT RENEW YOUR CPR CARD.**

Registration Process

A \$225.00 course fee includes Pediatric Advanced Life Support textbook, nursing CEUs, and pre-hospital professional CEHs.

Space is limited and available **FIRST COME, FIRST SERVED**. We encourage early registration so we can provide the best services to our participants.

To enroll, complete the enclosed registration form and mail with check payable to the EMSLRC or Fax with credit card information. Course materials will be mailed 4-6 weeks prior to the course start date.

PHONE REGISTRATION IS NOT ACCEPTED!

Cancellation Policy

You will receive a refund of all but \$25.00 of your registration fee if your registration is canceled prior to the mailing of course materials. After course materials have been mailed, until 48 hours prior to the beginning of the course, a 50% refund will be provided. Less than 48 hours prior to the beginning of the course, no tuition refund will be provided.

Emergency Medical Services Learning Resources Center

200 Hawkins Drive, S 608-1 GH Iowa City, IA 52242-1009

319-356-2597

Pediatric Advanced Life Support-Provider

Registration Information-COMplete & RETURN THIS ENTIRE PAGE

Course Fee

A non-refunded fee of \$225.00

This includes PALS textbook, nursing CEUs, and pre-hospital professionals CEHs.

DO NOT COMBINE PAYMENT FOR MULTIPLE COURSE REGISTRATIONS!

Please select one of the following courses:

- April 7,9,14, 2008 Evening course held 6:00 p.m. to 10:00 p.m. each night.
- August 4, 5, 2008 Daytime course held 8:00 a.m.-5:00 p.m.-day1 & 8:00-1:00-day 2.
- November 3,5,10, 2008 Evening course held 6:00 p.m. to 10:00 p.m. each night.

Please Print

COMPLETE THIS FORM AND RETURN THE ENTIRE PAGE

Please Print

(DO NOT DETACH)

SEND TO Samantha Murphy, EMSLRC, S 608-1 GH

NAME: _____ **TITLE/SPECIALTY:** _____

HOME ADDRESS: _____

CITY / STATE / ZIP : _____

PHONE (WORK/PAGER): _____ **(HOME)** _____

E-MAIL ADDRESS: _____

Method of payment

- Check or money order enclosed
- Credit card (Visa or MasterCard only)

Credit card no: _____

Expiration date: _____

Three digit code on back: _____

Cardholder's name: _____

Signature: _____

OFFICE USE ONLY: Deposit/Fee received Materials Packet Sent