

Liberty Fire Department

CPR CLASS

REGISTRATION FORM

Name: _____

Address: _____

City: _____

State / Zip: _____

Cell: _____

E-mail: _____

Class you wish to attend:

☐ Bloodborne Pathogen

☐ Healthcare Provider

☐ Heartsaver CPR/AED/First Aid

All Classes are \$55.00

Discounts are available for groups of 10 or more. Call Misty at 936-336-3922

If you are attending with a company, list company information below.

Name: _____

Address: _____

Phone Number: _____

Number in attendees: _____