# EMT Integrated Refresher Program

## Capital Health EMS Education

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| ____ Saturday (Session A) | Jun. 1, 2013 | 8AM-5PM |
| ____ Sunday (Session M) | Jun. 2, 2013 | 8AM-5PM |
| ____ Monday (Session T) | Jun. 3, 2013 | 8AM-5PM |

***This course is based on the new National EMS Education Standards***

This course will be held at Capital Health Emergency Services Training Center, which is located near the Mercer Campus at: 65 Prospect Street, Trenton, NJ 08618. Parking information and directions will be included in the pre-course packet.

**Course costs:**

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| Capital Health EMS & TEMS Employees (Manager/Supervisor approval mandatory) | NO CHARGE |
| ALL OTHERS | $65.00 each session or $195.00 for all 3 sessions |

**Attention Capital Health EMS Employees attending class at no charge:**
**Please be advised that registration for class constitutes acceptance of a work shift. Course cancellations outside of policy may result in performance and/or disciplinary consequences.**

**EMT-B'S ATTENDING THIS COURSE ARE STRONGLY ENCOURAGED TO REVIEW THE NEW EMS EDUCATIONAL STANDARDS PRIOR TO ATTENDING.**

**To Register:** Complete registration portion below and return with payment to:

Capital Health EMS Education
65 Prospect St.
Trenton, NJ 08618

Please make checks payable to: Capital Health EMS

Capital Health also accepts Visa/Mastercard

***NO PHONE OR FAX REGISTRATIONS WILL BE ACCEPTED!***

**Questions?** *Call the EMS education office at (609) 815-7291 or e-mail EMSEducation@capitalhealth.org*

EMT JUN REFRESHER

NAME _____ **NJ 6 Digit OEMS ID #** _____

ADDRESS _____ CITY _____ STATE ____ ZIP _____

Home Phone _____ Work Phone _____ E-mail _____

Capital Health EMS & TEMS Employees: **Manager Sign_____

** Manager must sign for sponsorship of Capital Health EMS & TEMS employees attending without payment of course fees.

*NO REGISTRATIONS WILL BE ACCEPTED VIA THE NJ OEMS LEARNING MANAGEMENT SYSTEM (LMS). ALL PARTICIPANTS WILL BE ADMINISTRATIVELY REGISTERED IN LMS BY CHS EMS EDUCATION STAFF WHEN THIS REGISTRATION FORM AND PAYMENT IS RECEIVED.*
*REGISTRATIONS WILL CLOSE 14 DAYS PRIOR TO COURSE DATE.*
*REGISTRATIONS BY MAIL MUST BE POST-MARKED NO LESS THAN 14 DAYS PRIOR TO COURSE DATE.*
*NO REFUNDS WILL BE MADE FOR CANCELLATIONS RECEIVED LESS THAN 7 DAYS PRIOR TO COURSE DATE. SUBSTITUTIONS ACCEPTED.*
*PLEASE BE PROMPT, PARTICIPANTS ARRIVING MORE THAN 15 MINUTES LATE WILL BE DENIED ENTRY.*

***APPLICANT SIGNATURE***_____ ***DATE***_____

***OFFICE USE ONLY:*** Date Received_____/_____/_____ Packet Sent_____/_____/_____