



American
Heart
Association®

**AUTHORIZED
TRAINING
CENTER**

AHA SCHEDULE - 2nd QUARTER (Apr—Jun 2020) UPDATED

BLS			ACLS Refresher			PALS Refresher	
Apr 3 9a-1p	May 6 9a-1p	Jun 3 9a-1p	Apr 8	May 7	Jun 4	Apr 7	May 11
Apr 6 9a-1p	May 8 9a-1p	* Sa. Jun 6 9a-1p*	Apr 14	May 13	Jun 9	Apr 16	Jun 5
Apr 17 9a-1p	May 12 9a-1p	Jun 8 9a-1p	Apr 27	May 28	Jun 19	May 1	Jun 15
Sa. Apr. 18 9a-1p	*May 14 6:30p-10:30p*	Jun 12 9a-1p	All ACLS Classes are scheduled from 9a—5p			All PALS Classes are scheduled from 9a—5p	
Apr 20 9a-1p	* Sa. May 16 9a-1p*	Jun 17 9a-1p					
Apr 23 9a-1p	May 21 9a-1p	Jun 18 9a-1p	ACLS Full Course (2 Days)			PALS Full Course (2 Days)	
April 28 6:30p-10:30p	May 27 9a-1p	*Jun 23 6:30p-10:30p*	Apr 1 & Apr. 2			Apr 21 & Apr 22	
Apr 30 9a-1p		Jun 26 9a-1p	May 4 & May 5			May 19 & May 20	
			Jun 1 & Jun 2			Jun 10 & Jun 11	

Course Costs for:

Non-Capital Health Employees

Capital Health Employees

BLS

\$75.00

ACLS/PALS Full Course (2 Days)

\$275.00

No Charge

ACLS/PALS Refresher (1 Day)

\$150.00

To Register:

This form is designed to be paperless. Fill out the form, save it then e-mail it as an attachment to:

EMSEducation@capitalhealth.org

Any applicable payment, checks (payable to: **Capital Health**) or credit card, accepted must be received before registration is finalized.

Questions?

Contact the EMS Education office at (609) 815-7291 or at the e-mail address above.

The American Heart Association strongly promotes knowledge and proficiency in all AHA courses and has developed instructional materials for this purpose. Use of these materials in an educational course does not represent course sponsorship by the AHA. Any fees charged for such a course, except for a portion of fees needed for AHA course materials, do not represent income to the AHA.

NAME: _____ CHS EMP ID #: _____

EMAIL ADDRESS *REQUIRED BY AHA* _____

Cell Phone Number *REQUIRED* _____

A COURSE TYPE REQUESTED: _____ (DATE) _____ TIME: _____

H 2nd Choice: (DATE) _____ TIME: _____ 3rd Choice: (DATE) _____ TIME: _____

A APPLICANT SIGNATURE _____ DATE _____

SUBSTITUTIONS INTO AN ALTERNATE CLASS MAY BE ALLOWED, IF THERE ARE SPOTS AVAILABLE. NO REFUNDS WILL BE GIVEN. CLASSES FILL QUICKLY, PLEASE PROVIDE ALTERNATE DATES IN CASE YOUR FIRST CHOICE IS FULL. AHA RULES PROHIBIT ADMITTANCE INTO CLASS 15 MINUTES AFTER SCHEDULED CLASS TIME.
FOR EMS EMPLOYEES: ENROLLMENT INTO AHA CLASS CONSTITUTES ACCEPTANCE OF A WORK SHIFT.

All Listed Courses Will Be Held At: EMS Education, 832 Brunswick Ave., 2nd Floor, Trenton, NJ 08638