REGISTER BY MAIL

Complete this registration form and mail to:

CPR LifeLine

9320 SW Barbur Blvd, Suite 175 Portland OR 97219

Student Information

Name:					
Address:		_City		_St	Zip
Phone:		-			
Email:					
A class confirmation will b	be sent via email upon receipt of i	registration and	payment.		
Class Information					
Class Title:					
Date:	Time:				
Class Fee:	BLS Book Fee = \$16 add ship	ping \$7.50 Y / N			
	uded with all Heartsaver classes. The chipped (allow 5 business days).	e BLS Provider s	tudent manua	l is \$16 a	and will be given to you
PAYMENT INFORMATION	ON - payment must be received	with registrati	on		
TOTAL ENCLOSED:	Check#	(pay	able to CPR	LifeLin	e)
Alternate contact for payr	ment:				
Phone:	Email:				

Cancellation/Rescheduling Policy: **NO Refund** if you cancel with less than 7 days notice.

- Cancellations received at least 7 days in advance of class may request a refund minus a \$5 processing fee or receive full credit to another class.
- Cancellations received less than 7 days in advance, but at least 24 hours prior to the class will be issued credit to reschedule with a \$10 rescheduling fee. A maximum of 4 people from any one group can be rescheduled.
- Cancellations received less than 24 hours prior to class, and "no shows" at class will **not** be issued a refund or credit and if a voucher was used, it will be voided. Substitutions are allowed with 24 hours notice.
- Please note that textbooks are not returnable and the purchase price is not refundable.

Do not bring children or unregistered guests to class. Children under 13 years old must register and attend with an adult. Classes with low enrollment may be canceled. If a class is canceled we will promptly notify you and every effort will be made to reschedule your training. If this is not possible, you will receive a refund.

Thank you for choosing CPR LifeLine! Please contact us with any questions 503-243-2277 registration@cprlifeline.com