

CPR CONSULTANTS

TRAINING CENTER

2017 Training Site Card Order Form

WWW.CPRCONSULTANTS.COM

919-850-9295 office cards@cprconsultants.com 919-235-0842 fax

DATE ORDERED _____

PICK UP DATE _____ TIME _____

Payment Method:

Cash / Check # _____

Tax Exempt # _____ form must be included

PO Number _____

Credit: __ MC __ Visa __ Amex __ Discover

Name on Card: _____

Card #: _____

Expiration Date: _____ CVV code on back: _____

Zip code: _____ Phone #: (_____) _____

Billing address for the credit card

Instructor Name _____
(Name to be printed on card)

PLEASE SHIP MATERIALS TO:
Allow up to 2 weeks for delivery

Name _____

Shipping Address (if different from billing) _____

City _____ State _____ Zip code _____

Email address – tracking information will be emailed

Daytime Phone Number _____

PLEASE ALLOW UP TO 2 WEEKS FOR DELIVERY	QUANTITY	TOTAL COST
CARD DESCRIPTION (all cards have tax)	CARD #	
ACLS Provider	15-1803	\$8.50 each
BLS Provider	15-1805	\$4.50 each
PALS Provider	15-1807	\$8.50 each
Heartsaver CPR AED	15-1810	\$19.50 each
Heartsaver First Aid	15-1811	\$19.50 each
Heartsaver First Aid CPR AED	15-1812	\$19.50 each
Heartsaver Pediatric First Aid CPR AED	15-1813	\$19.50 each
E-cards		
ACLS Provider eCard	15-3000	\$8.50 each
BLS Provider eCard	15-3001	\$4.50 each
Heartsaver First Aid CPR AED eCard	15-3002	\$19.50 each
Heartsaver Pediatric First Aid CPR AED eCard	15-3003	\$19.50 each
Heartsaver CPR AED eCard	15-3004	\$19.50 each
Heartsaver First Aid eCard	15-3005	\$19.50 each
PALS Provider eCard	15-3006	\$8.50 each

- Orders are processed within 48hrs; please check Enrollware for the status of your order
- TS Orders over 100 cards may take up to 14days before delivery
- Rosters & eval summaries must be entered in Enrollware within 5days of the class.
- Shipping and Handling Charges

1-4 Cards	\$2.50	51-100 Cards	\$12.00
5-10 Cards	\$4.25	101-300 Cards	\$14.00
11-18 Cards	\$6.00	301-500	\$16.00
19-50 Cards	\$10.00	2 nd day	\$30.00

Subtotal: \$ _____

S&H/order \$ _____

Subtotal \$ _____

Tax: \$ _____

Total: \$ _____

****If you would like the cards printed with the participant's name and course location, please specify the class date below. The class must be in Enrollware and finalized**