

# 2019 Instructor Update Form

Please complete this form and bring it and the following with you to the update

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

AHA Instructor Number: \_\_\_\_\_ Date: \_\_\_\_\_

Disciplines you teach: BLS \_\_\_ HS \_\_\_ ACLS \_\_\_ PALS \_\_\_ First Aid \_\_\_



2018 Dues paid (must be paid prior to attending an update)



Adult Feedback Manikin/Device



Instructor Manual for all disciplines you are certified to teach



DVD(s) for all disciplines you are certified to teach



Roster and Skills Sheets for all disciplines you are certified to teach



Four classes in each discipline you are certified to teach printed from Enrollware

## Office use



BLS written test



HS written test



ACLS written test



PALS written test



BLS Skills



Adult



Child



Infant



Heartsaver Adult



Heartsaver Child



Heartsaver Infant



First Aid Skills



ACLS Skills



PALS Skills

IC Issued

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