

## Registration Form NECA & IBEW Local 90 JATC Basic Life Support (CPR) /First Aid



	PRINT CLEARLY	
irst Name	Last Name	MI
.ddress	City/Town	
tate Zip Home	PhoneCe	ll Phone
ast Four Digits of Social Security (for	wallet ID Card) XXX-XX-	Date of Birth/
mployer	E-mail	
Payment Information **Credit	Cards are now Accepted**	**Credit Cards are now Accepted
e first serve basis. We will confirm stration must be sent in with payment; No cellation must be in writing and a \$2 marked 3 days prior to course and 100%	ard, and a certificate of completion. will hold your requested class on a first your class when payment is received. O Phone Confirmations will be accepted. 5.00 cancellation fee will apply when forfeit 24 hours prior and no shows. Any re is a \$30.00 fee for all returned checks e.	Charge to: MasterCard / Visa / American Expres    VISA   VISA
Select Class  January 28 & 30, 2014  Basic Life Support  First Aid  February 25 & 27, 2014  Basic Life Support  First Aid  March 25 & 27, 2014  Basic Life Support  First Aid	Please Make Cl Address: (Class NECA & Local 2 North Plains  Course Re Please complete a attending classes	190 JATC Industrial Road Wallingford, CT 06492 egistration Fee \$ 40.00 per person a registration form for each person
First Aid		Total \$