

**48-HOUR PARAMEDIC REFRESHER**

1144 Gateway Loop, Suite 136, [EMT.Associates@Comcast.net](mailto:EMT.Associates@Comcast.net) [www.EMTAssoc.com](http://www.EMTAssoc.com)

Springfield, OR 97477 541-844-1328 fax 541-636—3416

**DATES TIME COURSE LOCATION**

Jan 4,5,6,7,8, 2021 8:00 - 6:30pm EMT Associates Classroom - **Springfield**, OR 97477

Feb 6,7,13,14,20, 2021 8:00 - 6:30pm EMT Associates Classroom - **Springfield**, OR 97477

March 1,2,3,4,5, 2021 8:00 - 6:30pm EMT Associates Classroom - **Springfield**, OR 97477

**Upon Successful Course Completion you will receive\*: Course Schedule:**

• Course Completion Certification Day1 Airway, Respiratory Distress, 02, Communications

• **Available for purchase:** Day2 PALS, Pediatrics, OB (AHA PALS Cert avail\*)

• PALS Card\* $25, ACLS Card\* $25, BLS Card\* $25 Day3 Trauma

Day4 ACLS, Medical Emergencies (AHA ACLS & BLS avail\*)

Day5 Medical Em, Mental Health Em

**2021 Oregon Paramedic Refreshers!**

In accordance with the Americans with Disabilities Act, please advise EMT Associates if you have any disability that requires special materials and/or services.

No planners or faculty have any relevant information to disclose

**Cancellation/Late Registration/Transfers/No Show**

**Late registration is defined as registration received with less than 5 FULL business days [this includes "drop-ins"]. There is a $50 fee for all late registrations.**

**No Call/No shows and late cancellations / late transfers [less than 5 FULL business days] will be responsible for full payment. EMT Associates does not offer refunds once your registration is complete. If you are unable to attend the course, you must contact us 6+ business days prior to the start of the class.**

**Ways to Register: Online at** [**WWW.EMTASSOC.COM**](http://WWW.EMTASSOC.COM) **Fax to (541) 636-3416 Mail: 1144 Gateway Lp, Ste 136 - Springfield, OR 97477**

License Number (STATE and/or NATIONAL) and Expiration Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL REQUIRED for pre-course materials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_48-HOUR REFRESHER COURSE $700  *OR* Separate Days @ $185 each \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_Jan \_\_\_\_Feb \_\_\_\_March (List dates)

\_\_\_\_\_ Card ($25 Per card)\* \_\_\_\_BLS\_\_\_ ACLS \_\_\_ PALS \_\_\_\_ ACLS Textbook 2020 $50 PALS Textbook 2020 $50 \_\_\_\_\_ ACLS/PALS Handbook 2020 $45

\_\_\_\_\_ LATE REGISTRATION FEE $50 \_\_\_\_\_ Shipping $10

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| Payment Method: 🞏 CREDIT/DEBIT 🞏 CHECK #  Card Number: \_\_ \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_  Expiration Date \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ Security Code: \_\_ \_\_ \_\_ \_\_  Billing Zip Code \_\_ \_\_ \_\_ \_\_ \_\_ Total \_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |