



Kent Regional 4C Adult/Child/Infant CPR/First Aid Training and Bloodborne Pathogen Training

Do you need to get certified or recertified in CPR/First Aid and Bloodborne Pathogen Training?

Call Kent Regional 4C to schedule one of the following classes:

Class dates, times and cost (each number 1-9, represents a separate class):

1. CPR Adult Child Infant and First Aid Certification Monday, January 25 and Wednesday, January 27, 2010 from 6:00 pm – 10:30 pm. You must attend both nights to receive certification. Cost: \$57
2. CPR Adult Child Infant and First Aid Certification Saturday, February 27, 2010 from 8:30 am – 6:00 pm. Cost: \$57
3. First Aid recertification Saturday February 13, 2010 from 8:30 am – 9:30am Cost: \$10.00
4. CPR Adult Child Infant recertification Saturday February 13, 2010 from 9:30am – 1:30pm Cost: \$35.00
5. CPR Adult Child Infant recertification Wednesday, February 17th 2010 from 6pm – 10pm Cost: \$35.00
6. *Bloodborne Pathogen Training* Tuesday, February 23rd 2010 from 6:30pm – 7:30pm Cost: \$20
7. *Bloodborne Pathogen Training* Tuesday, March 16rd 2010 from 6:30pm – 7:30pm Cost: \$20
8. CPR Adult Child Infant recertification Tuesday, March 23rd 2010 from 6pm – 10pm Cost: \$35.00
9. First Aid recertification Saturday March 27, 2010 from 8:00 am – 9:00am Cost: \$10.00
10. CPR Adult Child Infant recertification Saturday, March 27th 2010 from 9am – 1pm Cost: \$35.00

Kent Regional 4C CACFP Voucher(s) can be used toward your class payment. (CPR and First Aid Books will be available for purchase at the class for \$15.00 cash.) If you schedule to attend one of the classes and are a participant in the Kent Regional 4C CACFP, you will receive 1 Training Voucher from us to use at a later date.

To register fill out the form below and send with payment to Kent Regional 4C, Class Registration, 233 East Fulton St Suite 107, Grand Rapids, MI 49503-3262. If you have questions call (616) 451-8281or 1-800-448-6995 ext. 242.

Name _____

Address _____ City, Zip _____

Phone # _____ Email _____

Please indicate the class title, class number, dates, and times:

Class Title(s) _____

Class # _____ Date and Day: _____ Time: _____ Cost: _____

Class # _____ Date and Day: _____ Time: _____ Cost: _____

To pay for a class by credit card (Visa, MasterCard or Discover), please call (616) 451-8281 x242. If paying by check, money order or CACFP vouchers send it with your payment and registration to:

Kent Regional 4C
Class Registration
233 East Fulton St Ste 107
Grand Rapids Michigan 49503-3262

Total Cost: _____