

INSTRUCTOR DATA FORM

This form must be completed with applicable fee included to receive a card.																			
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Status: RECOGNITION RENEWAL																			
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AHA COURSE DICLAIMER																			
The American Heart Association strongly promotes knowledge and proficiency in all AHA courses and has developed instructional materials for this purpose. Use of American Heart Association materials in an educational course does not represent course sponsorship by the American Heart Association. Any fees charged for such a course, except for a portion of fees needed for AHA course materials; do not represent income to the association.																			
First Name																			
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Circle all that apply: MD DO RN PhD EMT-P EMT DDS Other																			
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Training Site:		HM(C [] (Other_														
Preferred Method of Contact (check all that apply): Phone: Home Work Cell Email																			
*Fee includes AHA Instructor and Provider eCards valid for two-years and other Training Center support.																			
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