

Sussex County YMCA American Red Cross Registration Form

Name: _____ Date of Birth _____

Address: _____

Town: _____ State/Zip: _____

Phone: _____ Cell: _____

e-mail: _____

Class Dates (Check one):

CPR for the Professional Resuer/AED

Member: \$85.00 Non Member: \$115.00 Check one

Wednesday	April 7	8:30am-5pm	
Saturday	May 15	7:30-4:00	
Wednesday	June 23	8:30am-5pm	

Recertification - CPR for the Professional Rescuer/AED

Member: \$45.00 Non Member: \$70.00

Monday	March 22	6:00-9:30	
Friday	May 21	5:30-9:00pm	
Saturday	June 19	9:00am-12:30 pm	

Community CPR /AED & O2

Member: \$85.00 Non Member: \$105.00

Saturday	February 27	7:00am - 3:30pm	
Saturday	June 5	7:00am - 3:30pm	

Recertification - Community CPR/AED

Member: \$45.00 Non Member: \$65.00

Saturday	March 6	1-4:30	
Saturday	April 24	9am-12:30pm	
Saturday	June 19	1:00-4:30pm	

First Aid

Member: \$50.00 Non Member: \$75.00

Saturday	March 6	8:00am-12pm	
Saturday	April 24	1:30-5:30	
Thursday	June 3	5:30-9:30	

Please note: pre-registration and payment is required for all classes. Class size is limited, please register early.

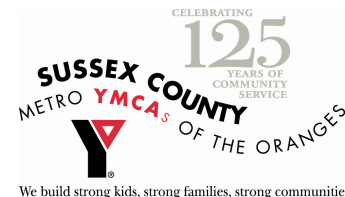
Total enclosed: \$ _____ Check (payable to Sussex County YMCA)

_____ Credit Card (circle one) VISA MC Discover AMEX

Card # _____ Exp Date: _____

Signature _____

Sussex County YMCA
15 Wits End Rd
Hardyston, NJ 07419
Phone: 973 209-9622 / Fax: 973 209-1483



Office Use only: Member/Non-Member Receipt # _____

** Review refund policy and check initials. Staff Signature _____