



Total Sunshine™

“Promoting Smiles In Any Community”

**CPR/BLS Course Pre-Registration**

Name: \_\_\_\_\_

Date: \_\_\_\_\_ Date of desired course: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Purpose of training: \_\_\_\_\_

Are you a healthcare provider? \_\_\_\_\_ Where? \_\_\_\_\_

Is this your first certification? \_\_\_\_\_ Renewal? \_\_\_\_\_

Have you completed any portion of your training online? \_\_\_\_\_

Did you receive a certificate? (If so, you MUST bring to class) \_\_\_\_\_

Do you have any special needs/disabilities we would need to accommodate during your training?

\_\_\_\_\_  
--It is highly recommended that students complete registration at least 3 business days prior to class attendance— confirmation of registration will be available.

Donation method (indicate one) --Minimum \$65 recommended--

\_\_\_\_\_ Online: Paypal on website – [www.totalsunshine.org](http://www.totalsunshine.org)

\_\_\_\_\_ Paper check – mail to office: 2500 MLK Avenue SE, Wash., DC 20020

\_\_\_\_\_ Cash – receipt will be given on-site (pre-registration is required)

--Registration for AHA CPR with TSI indicates that you’ve been notified that your provider card will be available/mailed within 5 business days of course completion.

--For course textbooks or study materials, please contact us.

--Please wear loose/comfortable clothing/shoes for your training, as you will be performing practical skills that require movement.

--As a provider of AHA BLS Courses, TSI does not endorse any specific brand of resuscitative equipment for use/purchase to perform BLS.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In signing this registration form, I acknowledge receipt of the information provided within, agree to comply with class dress codes, and agree to hold TSI blameless should I suffer injury while attending course or performing BLS skills. I also agree it is my responsibility to confirm class start time, and arrive promptly.

**Please return signed course pre-registration form to TSI at [info@totalsunshine.org](mailto:info@totalsunshine.org)**

Total Sunshine, Inc • 2500 Martin Luther King Jr. Ave, SE • Washington, DC 20020 • (202) 575-0462



Web: [www.totalsunshine.org](http://www.totalsunshine.org) • Email: [info@totalsunshine.org](mailto:info@totalsunshine.org)

CFC # 77609 “Medic to Society...Promoting Smiles!”