

**Student names & email address must be legible for correct database entry and card issuance

Course Participants

Full Name ** <i>Please PRINT as you wish your name to appear on your card.</i>	Textbook Present Initial to acknowledge	Cell Phone for eCard claiming	Email Address ** <i>Please PRINT legibly for receipt of eCard</i>	Address, City, State Zip	BLS Exam score/ Remediation (4 pts each)	Course Completed	Date eCard Issued
1					/	Y N	
2					/	Y N	
3					/	Y N	
4					/	Y N	
5					/	Y N	
6					/	Y N	
7					/	Y N	
8					/	Y N	
9					/	Y N	



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