



## American Heart Association Instructor Essentials Course

Training Concepts, Inc  
485 W Armory Dr, Ste A  
South Holland, IL  
60473  
Phone: 708.596.3155

**Time:** 9:00 a.m. – 4:00 p.m.

**Location:** Training Concepts, Inc  
485 W Armory Dr, Suite A  
South Holland, IL 60473

**Base Cost:** \$595 base price includes

- Instructor Essentials Online Course
- AHA Instructor Manual
- AHA Instructor Candidate Workbook
- Classroom instruction
- Faculty monitoring of your first class
- Instructor card

**Additional costs:** \$120 additional cost for BLS candidates also teaching Heartsaver.

- If BLS instructor and intending to teach the Heartsaver course discipline, additional cost includes the additional required Essentials online course and Heartsaver Instructor manual.

Registration will be confirmed by email and Instructor materials provided upon receipt of the \$150 initial payment.

Initial \$150 deposit is non-refundable and candidate must attend class within 4 months of original class registration

A \$50 cancellation fee may be assessed if less than 2 business day notice is provided

**Fax or send registration form, copy of current CPR card and a non-refundable \$150 deposit to:**

Training Concepts, Inc.  
485 W Armory Dr, Suite A  
South Holland, IL 60473

Phone: 708.596.3155  
FAX: 708.596.1818  
Email: [office@LARNCP.com](mailto:office@LARNCP.com)

**(Please circle one)** BLS Only: \$595 BLS with Heartsaver: \$715 Heartsaver Only: \$595

**Date of Course:** (Please circle one) January 15 February 11 March 5

**Current CPR Card type:** (Circle one & attach card copy) BLS Provider Heartsaver

**Instructor Candidate** \_\_\_\_\_ **Email** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**City, State, and Zip** \_\_\_\_\_ **Home Phone** \_\_\_\_\_

### **Billing info if different than mailing:**

**Bill to Company** \_\_\_\_\_ **Contact** \_\_\_\_\_

**Address** \_\_\_\_\_

**City, State, and Zip** \_\_\_\_\_ **PO# (if applicable)** \_\_\_\_\_

### **To pay with Credit Card (Visa, Mastercard, American Express, Discover):**

**Cardholder's Name:** \_\_\_\_\_ **Billing Address:** \_\_\_\_\_

**Credit Card#:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **Verification Code:** \_\_\_\_\_ **Amount:** \_\_\_\_\_

Course Disclaimer: "The American Heart Association strongly promotes knowledge and proficiency in BLS, ACLS, and PALS and has developed instructional materials for this purpose. Use of these 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 material, do not represent income to the Association."