



2007/2008 FIRST AID/CPR/AED CLASSES

- DATES:** December 17 – 21, 2007 and January 7 – 11, 2008
- TIME:** 7:00 AM - 2:30 PM (approximate); Attendees must participate in the full-day class regardless of their First Aid, CPR or AED certification cycle.
- LOCATION:** Western Pennsylvania Laborers' Training Center - Phone: (724) 352-2224
317 Deer Creek Road, Saxonburg, PA 16056
For directions, visit www.laborpa.org/trainingcenter.htm
- COST:** \$35.00 (includes lunch); *Training is free to employees who are Laborers.*
Make check payable to H2AP and submit with registration to:
CAWP, 1201 Banksville Road, Pittsburgh, PA 15216
- REGISTER:** Online at www.cawp.org or fax this form to Donna at (412) 343-8005.
Please register no later than 1 week prior to the applicable class date.
Register early - registrations will be taken on a first-come, first-served basis.
Maximum class size for each day is 24.
NOTE: If a registered attendee must change their class date, it is imperative to contact Donna at (412) 343-8000 to make the appropriate schedule changes.

NO REFUNDS WILL BE ISSUED FOR CANCELLATIONS RECEIVED WITHIN 3 DAYS PRIOR TO APPLICABLE CLASS DATE.

First Aid/CPR/AED Training

Names(s)	Mon 12/17	Tues 12/18	Wed 12/19	Thur 12/20	Fri 12/21	Mon 1/7	Tues 1/8	Wed 1/9	Thur 1/10	Fri 1/11
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Company _____ Contact Name _____

_____ Contact Phone # _____

_____ Contact Email _____

The Class Fee is **\$35.00** per person (except Laborers).
Enclosed is a check for a total amount of \$ _____, payable to **H2AP**.