



FOR YOUTH DEVELOPMENT™
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

PERSONAL CONFIDENCE COMMUNITY SAFETY

CPR (BLS), First Aid, and Emergency Oxygen Trainings C.B. PENNINGTON, JR. YMCA

ASHI'S Basic Life Support (formerly CPR-PRO) teaches students how to recognize a life-threatening emergency, how to provide basic life support and what to do in case of an airway obstruction or choking. ASHI's Basic First Aid and Emergency Oxygen Administration will teach students how to provide basic first aid care in a variety of situations and how to properly use emergency oxygen.

WHEN: 2nd Saturday of every month
TIME: 9am – 1 p.m.
LOCATION: C.B. PENNINGTON, JR. YMCA
15550 Old Hammond Hwy.
Baton Rouge, LA 70816
225-272-9622
www.ymcabr.org, skelley@ymcabr.org





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**Basic Life Support (formerly CPR-PRO), Basic First Aid, and
Emergency Oxygen Administration Training
Cost Per Participant:**

◇ **Member: \$80**

◇ **Program Participants \$100**

Participant's Name: _____ Age: _____ Gender: _____

Address: _____ City: _____ State: _____ Zip: _____

DOB: _____ Home#: _____

E-Mail (REQUIRED): _____

Emergency Contact: _____ Phone: _____

No registration will be accepted without an e-mail address.

- Prerequisites: There is an online portion of the course which needs to be completed before you come to class. You will need to bring your completion certificate with you to class. Participants must have the physical capability to do compressions. Participants will be spending a lot of time kneeling by victim for practice sessions. This class is for ages 11 & up.
- Registration ends at one week before the start of the class.
- In case of low enrollment (2 or less), classes may be canceled.

Check a Session:

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> January 12th | <input type="checkbox"/> July 13th |
| <input type="checkbox"/> February 9th | <input type="checkbox"/> August 10th |
| <input type="checkbox"/> March 9th | <input type="checkbox"/> September 14th |
| <input type="checkbox"/> April 13th | <input type="checkbox"/> October 12th |
| <input type="checkbox"/> May 11th | <input type="checkbox"/> November 9th |
| <input type="checkbox"/> June 8th | <input type="checkbox"/> December 14th |

Refunds are available minus a \$10 processing fee. A written request is required for all refunds. There is a \$25 charge on all returned checks. The YMCA does not provide accidental/ medical insurance for program participants. I grant the YMCA or its agent's permission to transport my child in the event of an emergency and I am unable to be contacted. I recognize that participation in YMCA activities may expose my child to some risk of injury. I agree to hold the YMCA harmless from any claims for damage to property or injury, which may occur through participation in any activity at the YMCA or in its programs. The YMCA reserves the right to use photographs taken of program participants and their family for marketing and publicity.

I have read and understand the above information. My child has permission to participate in this YMCA program.

Signature of Participant: _____

Date: _____