



CPR & First Aid Certification

AMERICAN HEART ASSOCIATION

Offered by the City of St. Johns Recreation Department and Clinton Area CPR and EMS

WE WELCOME: HUNTERS, FAMILIES, FRIENDS, BABYSITTERS, HEALTH CARE PROFESSIONALS, CHILD CARE PROVIDERS, AND BUSINESS OWNERS!

Date: Thursday, June 1, 2017

Time: 6:00 p.m. – 9:00 p.m. (first aid will end between 8:30/9:00)

Where: St. Johns Railroad Depot (across from the library)

Cost: \$50 CPR and First Aid; \$37.50 CPR only for lay people; \$18.75 for Youth (10-18)

Recommended books and materials can be purchased for \$15 the night of the class, see instructors.

Deadline to register is May 30, 2017 or until full.

Register at the City Office before the deadline or by mailing your payment and registration form to:

City of St. Johns, P.O. Box 477, St. Johns, MI 48879

Make Checks Payable and Mail to: City of St. Johns P.O. Box 477 St. Johns, MI 48879 – Phone 989-224-8944 ext.228

Participant Name _____ E-mail Address _____

Address _____

Home Phone _____ City _____ State _____ Zip _____
 Cell _____

I recognize that my participation in sporting activities and athletic competition subjects me to certain risks of physical injury. I hereby assume this risk as my own and all responsibility for any such injuries as they relate to said participation in sports/**recreational** activities on City property **or properties used for City recreational activities**. By signing this document I agree to waive any rights or claims I may have for damages arising from injuries I may receive while participating in recreational events sponsored or supported by the City of St. Johns and/or the St. Johns Recreation Department. I hold harmless the City of St. Johns and any of its employees or agents from all such claims, lawsuits, actions and/or damages. I also agree to allow any photographs taken during the activity to be used by the recreation department.

Participant Signature _____ Date _____

Participant's Name	Activity	Date	Time	Program Fee	Total Fee