

ITLS Registration form

Name

Address

City

State _____ ZIP _____

Home phone

Other phone

Email

Agency/organization affiliation

Provider Level (circle one):

EMR/FR	AEMT/EMTI	EMT
MD	Paramedic	RN

IDPH EMS# _____

Expiration date _____

NREMT# _____

Expiration date _____

Registration fee: \$125

Registration includes text, course materials, and certification fees. Registration deadline is last business day two weeks prior to course date. There will be no refunds or cancellations on or after this date. Registration is non-transferable.