



CPR/First Aid Class Registration Form

Name _____ Date of Class _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ E-mail _____

Organization _____

Class Requested _____

Class Location _____

Method of Payment:

Check # _____ Credit Card (circle one): VISA MASTERCARD

Card Number: _____ Expiration Date: _____ Security Code:* _____

Name as it appears on card: _____

Signature: _____

*What is the security code? This code is a three-digit number found on the back of Visa and MasterCard.

If paying by credit card, submit electronically by clicking the icon below.

If paying by check, please mail this form with check (payable to SportsPlus) to:

SportsPlus
Attn: CPR
90 Mission Blvd Suite B
Pleasanton, CA 94566

Please note: You will NOT receive confirmation of your registration until payment has been received. You may confirm your registration by calling 925-462-5557. You will be notified by email if the class is cancelled.