

Register online today, visit ECCU2010.com

REGISTRATION FORM

Register by September 15th to SAVE Up to \$100 and Qualify to Win a FREE San Diego Get Away!

STEP 1 REGISTRANT INFORMATION (Please print information as you would like it to appear on name badge.)

First Name _____ Middle Initial _____ Last Name _____ Credentials/Suffix _____

Title/Position Check here if you are a physician _____

Employer or Organization You Are Representing _____

Business Address _____

City _____ State/Province _____ Zip Code/Postal Code _____ Country _____

Business Phone _____ E-mail _____

Please list any special needs resulting from a disability and/or special dietary restrictions _____

STEP 2 ADDITIONAL INFORMATION (please check all that apply)

THIS IS THE FIRST CPCR/ ECCU CONFERENCE THAT I HAVE ATTENDED

Occupation/Position:

- Physician
- Nurse
- Administrator/Supervisor
- Paramedic/EMT Provider
- CPR/ECC/EMS Instructor/Coordinator
- Respiratory Therapists
- EMS Dispatchers
- Other. Please print position here: _____

Check all the ways you heard about ECCU 2010:

- AHA ECC Beat eNewsletter
- CPCR Website
- Advertisement. List publication here: _____

- Direct mailing of brochure
- Past participant
- E-mail message
- From my employer or colleague
- Other. Please list here: _____

Your affiliation:

- American Heart Association (AHA)
- American Red Cross (ARC)
- Emergency Medical Services. Please identify here: _____
- Heart and Stroke Foundation of Canada
- InterAmerican Heart Foundation
- Military Training Network (MTN)
- Other. Please list here: _____

Check to be excluded from the attendee list

For planning purposes, please indicate attendance:

- Free Continental Breakfast with the Experts on Friday/Saturday

STEP 3 SCHEDULE OF FEES/SELECTIONS (listed in U.S. dollars)

CONFERENCE REGISTRATION

Please check one of the following:

- Super Early Bird Registration..... \$450
Postmarked by September 15, 2010
- Regular Early Registration.....\$475
Postmarked by November 7, 2010
- Regular & On-Site Registration..... \$525
Postmarked after November 7, 2010

SINGLE DAY REGISTRATION

(Single day registration fees include the educational sessions, continental breakfast, and beverage breaks offered that day.)

Please check one of the following:

- Thursday, December 9, 2010 \$225
- Friday, December 10, 2010\$225
- Saturday, December 11, 2010\$115

ADDITIONAL FEES

- Golden Anniversary Survivor Dinner at SeaWorld (Thursday evening, Dec. 9).....\$100
- Continuing Medical Education (Fee for physicians who wish to receive CME) \$85

GROUP DISCOUNT

Multiple Registration Discounts: Less \$20 per person if three or more attendees are from the same organization and payment is made together. Please complete separate registration forms, but submit them together with a single payment.

Please list the names of other attendees who are to receive the group discount below:

1. _____
2. _____
3. _____
4. _____

STEP 4 PRE-CONFERENCE WORKSHOPS

Please check the box next to each workshop you will attend. Please note: You may attend a workshop without registering for the conference. Workshops are subject to cancellation if minimum numbers are not achieved.

TUESDAY DECEMBER 7

Morning (\$115, 1/2 day)

- Advanced Resuscitation Training (ART)
- A Masters Class for Master Teachers

Afternoon (\$115 each, 1/2 day)

- Military Training Network: Update 2010
- Implementing School-Based PAD Programs
- Using Social Media to Create a Cultural Shift

Special Workshop (\$115; limit of 50)

- PAD Programs at Theme Parks and Other Mass Gatherings (9:00 a.m. – noon, followed by free time at SeaWorld; includes transportation and admission to SeaWorld)

WEDNESDAY DECEMBER 8

AHA Update Courses (\$55 each; \$150 for complete set; must be certified AHA instructor)

- BLS (8:00 a.m. – 10:00 a.m.)
- PALS (10:00 a.m. – noon)
- ALS (1:00 p.m. – 3:00 p.m.)
- BLS (repeat; 3:00 p.m. – 5:00 p.m.)
- Complete set (Please select times)

Morning (\$115 each, 1/2 day)

- Integrating Simulation into Training

Afternoon (\$115 each, 1/2 day)

- A Masters Class for Master Teachers (repeated)
- Sudden Cardiac Arrest Survivors Forum

All Day (\$195 each)

- Therapeutic Hypothermia after Cardiac Arrest (limit of 40)
- NRCPR: Improving In-Hospital Resuscitation
- Eagles 2010: Science and Practice of Resuscitation
- Diving Deep with the ARC: A Learning-Centered Approach to Teaching CPR and First-Aid (limit of 25)
- The 2010 ACLS Renewal Course (limit of 30)

Special Workshop (\$195; limited to 50)

- Motivate the Masses: CPR Across America (includes transportation and fees to Balboa Park, USS Midway and lunch at The Prado)

STEP 5 GUEST REGISTRATION

Check here if you would like to register an adult guest (age 18 and over). The fee is \$95. This registration includes admission to the Opening Reception on Wednesday evening, and continental breakfasts on Thursday, Friday and Saturday.

Name for badge _____

Check here for a guest ticket for Opening Reception only (\$30)

STEP 6 TOTAL FEES (Funds MUST be submitted on a U.S. bank in U.S. funds.)

Total Registration Fee [FROM STEP 3]	\$ _____
Total Workshop Fee [FROM STEP 4]	\$ _____
Golden Anniversary Dinner Fee [FROM STEP 3]	\$ _____
Continuing Medical Education Fee [FROM STEP 3]	\$ _____
Group Discount [FROM STEP 3]	– \$ _____
Promotional Discount.....Code#	– \$ _____
Guest Registration Fee [FROM STEP 5]	\$ _____
TOTAL PAYMENT ENCLOSED	\$ _____

(Payment is due with the registration form.)

STEP 7 METHOD OF PAYMENT (Please check one below)

I will be paying by: Credit Card Government Purchase Order Check # _____ made payable to the Citizen CPR Foundation (CPCR) in U.S. funds (Please write the names of all registrants on the check.)

Charge payment to the following credit card: Visa MasterCard American Express

Card Number	Exp. Date	Security Code
Signature	Cardholder's Name (as it appears on the card)	
Billing Address		

STEP 8 SEND YOUR REGISTRATION (Please choose one only)

ONLINE: Complete the registration form(s) with credit card payment information at ECCU2010.com

E-MAIL OR FAX: Completed registration form(s) with credit card payment information to (703) 241-5603 or e-mail eccu@citizencpr.org

MAIL: Post registration form and appropriate fees to:
CPCR Executive Office, 201 Park Washington Ct., Falls Church, VA 22046

QUESTIONS? CONTACT THE CPCR REGISTRAR AT (703) 538-3548 OR ECCU@CITIZENCPR.ORG