

**CPR+AED CERTIFICATION @ SHF REGISTRATION FORM FOR INDIVIDUAL / ORGANISATION**



**FOR INDIVIDUAL\* / FAMILY GROUPS USE ONLY:**

Name (as per NRIC) : \_\_\_\_\_  
 Address : \_\_\_\_\_  
 \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Contact Nos : \_\_\_\_\_  
 E-mail : \_\_\_\_\_

*\*Please also fill in all fields in the table below if you are applying as an individual.*

**Refund Policy:**

*All paid fees are strictly non-refundable and non-transferable.*

*Singapore Heart Foundation reserves the right to cancel, postpone or change the venue of any class.*

**FOR ORGANISATION USE ONLY:**

Company Name : \_\_\_\_\_  
 Company Address : \_\_\_\_\_  
 \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Person-in-Charge : \_\_\_\_\_  
 Designation : \_\_\_\_\_  
 Contact No : \_\_\_\_\_  
 E-mail : \_\_\_\_\_

Company Stamp : \_\_\_\_\_

S/N	Name (as per NRIC)	NRIC/ Passport No (foreigners only)	Date of Birth	Race	Contact No	Sex	Email	Occupation / Designation	Programme Date	Language Preference
1										
2										
3										
4										
5										
6										
7										
8										

**For Official Use Only:**

Total Course Fee:	Payment Detail	
	Payment: (Cash / Money Order / Cheque)	
	Bank Name:	Cheque No:
	Date Received:	Receipt No:
	Authorised By:	

**Please note the following:**

\* Participants will be charged full course fee for no-shows, postponements and cancellations giving less than **5 working days' notice**. However, replacement of eligible participants is allowed within **2 working days**.

\* If minimum number of participants is not met **2 weeks before the course date**, SHF reserves the right to cancel the class.

Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please submit this registration form together with the payment to Singapore Heart Foundation, 9 Bishan Place, #07-01 Junction 8 (Office Tower), Singapore 579837.*

*Alternatively, you can email or fax the completed form to [cpaed@heart.org.sg](mailto:cpaed@heart.org.sg) or 6258 5240 to make a reservation. Please note that registration is confirmed only upon receipt of payment.*