## Pediatric Emergency Assessment, Recognition, and Stabilization (PEARS)



Registration Form (External Attendee)

| Name:                       |              |          |   |                          |  |
|-----------------------------|--------------|----------|---|--------------------------|--|
| Profession:                 |              |          | Organization:   |                          |  |
| Email Address:              |              |          |   |                          |  |
| Address:                    |              |          |   | Phone:                   |  |
| City:                       |              |          | State:  | Zip:                     |  |
| Method of Payment:<br>□Cash | □Credit Card | □Check   | Payable to: <b>Children's Hospital &amp; Medical</b><br><b>Center</b> |                          |  |
| Credit Card: □Visa          | □MasterCard  | Discover | □American Express   | Amount: <b>\$ 150.00</b> |  |
| CC Account number:          |              |          | Exp date:   | CVC#:                    |  |
| Name on card:               |              |          |   |                          |  |

Signature:

| Cost: \$150.00   | PEARS Provider Schedule |                |          |  |
|--|-------------------------|----------------|----------|--|
| (Includes PEARS Instructor-led session at Children's and   | Training Date           | Start Time     | End Time |  |
| eCard)   | January 23, 2024        |                | ·        |  |
|  | February 6, 2024        |                |          |  |
| Please send completed form & payment via mail,   | February 21, 2024       |                |          |  |
| fax or email to:   | March 19, 2024          |                |          |  |
| Children's Nebraska<br>Clinical Education  | April 17, 2024          |                |          |  |
| 8200 Dodge Street  | May 16, 2024            |                |          |  |
| Omaha, NE 68114  | June 11, 2024           |                |          |  |
| Email: PALS@childrensnebraska.org  | July 11, 2024           |                |          |  |
| <b>Phone:</b> 402-955-6058   | July 23, 2024           |                |          |  |
| <b>Fax:</b> 402-955-5803   | July 30, 2024           | All class      | sessions |  |
|  | August 13, 2024         | take pla       | ice from |  |
| Classes take place at <b>8401 West Dodge Road</b> —Indian Hills<br>North: Lower Level—Suite 5 North Classroom.   | August 20, 2024         | 8:00am—4:30pm. |          |  |
|  | August 22, 2024         | 0.00um         | 1.50pm.  |  |
|  | August 27, 2024         |                |          |  |
| Students are required to obtain a PEARS Provider Manual in order to<br>attend the class. Students must bring their PEARS Provider Manual to                | September 10, 2024      |                |          |  |
| class and will not be allowed to attend without it. PEARS Provider   | September 19, 2024      |                |          |  |
| Manuals can be purchased at <u>http://shopCPR.heart.org</u> .  | September 24, 2024      |                |          |  |
|  | October 15, 2024        | ]              |          |  |
| The American Heart Association strongly promotes knowledge and proficiency in CPR and has developed instructional materials for this purpose. Use of these | November 13, 2024       |                |          |  |
| materials in an educational course does not represent course sponsorship by the  | December 10, 2024       | ]              |          |  |
| American Heart Association, and any fees charged for such a course do not represent income to the Association.   | December 17, 2024       | ]              |          |  |