## IRISH HEART FOUNDATION CPR & ECC TRAINING PROGRAMME BLS/ HEARTSAVER & CFR COMMUNITY INSTRUCTOR COURSE REGISTRATION FORM



(Please send completed instructor course paperwork and instructor course roster/ timetable to <a href="mailto:resus@irishheart.ie">resus@irishheart.ie</a>)

Course Information							
☐ BLS & CFR Community Instructor Course		IHF Training Site:					
☐ Heartsaver & CFR Community Instructor Course		County:					
Course Start Date		Number of instructor candidates:					
Course Finish Date		Student: Manikin Ratio:					
Provincial Faculty/ Instructors	Instructor IHF Nun	nber	Instructor Certific	ation EXP Date	Instructor Signatu	re	
1.							
2.							
3.							
4.							
5. 6.							
6.							
<del>7.</del> 8.							
8.							
I verify that this information is accurate and truthful <b>Learning Platform Fair Processing Notices</b> in order they are monitored and signed off on a later date.	er to receive their e	lectronic BL	.S/ Heartsaver Inst	ructor certificate an	d physical CFR Comm		
Signature of Provincial Faculty/ Course Coordinato	r	Da	ate				

Fair Processing Notice - By listing their name and email address below, instructor candidates agree to the Irish ( <a href="https://ihf.eu.learning.laerdal.com/">https://ihf.eu.learning.laerdal.com/</a> ) for up to 5 years after the date of instructor certification. The information of	
after they are monitored and signed off. Anonymous statistical data in relation to this programme may be share purposes. Instructor name, postal address, email address and phone number will be processed on our secure IHF	d with our programme partners, American Heart Association and Laerdal Medical, for reporting and analysis
truining queries of injoinfation from in it. If you have any requests concerning your personal injoinfation or any t	quenes with regard to our processing, piedse contact <u>resostanishmed the</u> or visit <u>netps://insimedr.ne/privacy-ponc</u>
Instructor name, email address & certification information are uploaded by IHF to our secure database and the IHF/Laerdal Learning Platform – you will receive your AHA instructor ecard by email from Laerdal when you are monitored and signed off	Instructor postal address & contact number
1. Name:	
Email address to send AHA instructor ecard to:	
2. Name:	
2. Email address to send AHA instructor ecard to:	
3. Name:	
3. Email address to send AHA instructor ecard to:	
4. Name:	
4. Email address to send AHA instructor ecard to:	
5. Name:	
5. Email address to send AHA instructor ecard to:	
6. Name:	
6. Email address to send AHA instructor ecard to:	

Instructor Course date(s):