

**2025 AMERICAN HEART ASSOCIATION  
ADVANCED CARDIAC LIFE SUPPORT PROVIDER UPDATE/RENEWAL COURSE**  
*Offered by Health Education Strategies, LLC*

**COURSE OBJECTIVE:** The American Heart Association course is designed to teach providers the knowledge and skills necessary to evaluate and manage an acute cardiac event or cardiac arrest. For providers who are expected to treat critically ill patients. An American Heart Association ACLS Provider Card issued upon successful course completion.

**PREREQUISITES:** Current AHA ACLS & BLS Provider Cards (include card copies with registration)

**PRE-COURSE MODULES WILL BE ASSIGNED AND MUST BE COMPLETED PRIOR TO ATTENDING YOUR SCHEDULED COURSE DATE!**

**COURSE FEE:** \$165 Fee includes all course materials. Materials will be distributed upon receipt of payment. Refreshments are provided.

**REGISTRATION DEADLINE:** Two (2) weeks prior to course date. Registrations received after will be subject to **an additional \$10.00 late registration fee.** Registrations can be emailed/faxed, dropped off or mailed. Our contact information is listed below.

**COURSE LOCATION:** Health Education Strategies Training Site - 11460 Telegraph Rd - Taylor, MI 48180

**CANCELLATION POLICY:** Fees are **NON-REFUNDABLE.** Fee may be applied to a future rescheduled course if taken within six (6) months of the cancelled course. Cancellations made within **two weeks** of the course will be charged an additional **\$75.00** rescheduling fee.

**DISCLAIMER:** *Continuing Medical Education Units are not available/provided for the ACLS training through H.E.S. You can however; provide a copy of the course agenda and your AHA certification card to your credentialing organization. They may award CME/CE Units for you.*

**REGISTRATION FORM**

**ALL AHA PROVIDER & RENEWAL COURSES REQUIRE THE CURRENT COURSE STUDENT MANUAL.**

I already have AHA G2020 ACLS Manual (20-1106)

Deduct \$25.00 from course fee

ACLS Provider Print Edition or  ACLS Provider eBook

I already have AHA G2020 BLS Provider Manual (20-1102)

Deduct \$10.00 from course fee if taking with ACLS

BLS Provider Print Edition or  BLS Provider eBook

**BLS PROVIDER TRAINING POST ACLS-\$60**

November 19, 2025 (3 pm-10 pm)

November 23, 2025 (8 am-4 pm)

YES

NO

December 14, 2025 (8 am-4 pm)

December 30, 2025 (3 pm-10 pm)

**Office Use Only**

Materials Provided:

ACLS Provider Manual:

Print  eBook

BLS Provider Manual

Print  eBook

Letter/Agenda/Map

Invoice# \_\_\_\_\_

Mail  E-Mail  Office Pick Up

**PLEASE PRINT CLEARLY:** H.E.S. is not responsible for lost mail.

Name: \_\_\_\_\_

Credentials/Title: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Day Telephone: \_\_\_\_\_ Night Telephone: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

**(U.S. Mailing Address Only)**

City, State, Zip Code: \_\_\_\_\_

Employer: \_\_\_\_\_ Department: \_\_\_\_\_

**PAYMENT MUST ACCOMPANY REGISTRATION**

Please make check/money order payable to "Health Education Strategies, LLC" and mail to:

**11460 Telegraph Rd-Taylor, MI 48180** (Canadian checks must be US Currency).

For further Information, contact our office at 734-288-3050/Fax: 734-250-7951

Email: [healthedst@gmail.com](mailto:healthedst@gmail.com) Web: [www.healtheducationstrategies.com](http://www.healtheducationstrategies.com)

**Office Use Only**

Amt Pd: \$ \_\_\_\_\_

Cash  Credit Card

Check  Money Order

# \_\_\_\_\_

Date: \_\_\_\_\_

Rec'd: \_\_\_\_\_

**ADD**

Late Registration

Fee - \$10.00

Yes

**WE ACCEPT VISA/MASTERCARD/DISCOVER/AMEX CREDIT CARD PAYMENTS**

<b>Card Number:</b> _____		<b>Expiration (Mo/Year):</b> _____
<b>Total Amount Authorized:</b> _____	<b>Security Code:</b> _____	<b>(Located on Back of Card next to Signature Line. Usually 3 or 4 digits.)</b>
<b>Cardholder Name:</b> _____		
<b>Cardholder Billing Address:</b> _____		
<b>I agree to pay above amount according to card issuer agreement.</b>		
<b>Cardholder Signature:</b> _____		
<b>Cardholder Email Address:</b> _____		