

**WILDERNESS FIRST AID CERTIFICATION  
and  
WILDERNESS FIRST RESPONDER RECERTIFICATION**  
sponsored by REI, McDowell Sonoran Conservancy and the Wilderness Medicine Institute of NOLS

**October 3<sup>rd</sup> – 4<sup>th</sup>, 2009**  
La Mirada Desert Center, Scottsdale, Arizona  
**\$195.00 Registration Fee – Payment Due in Full (Fee Code 30)**

| <b>REGISTRATION INFORMATION</b>   |   |                 |
|---|---|-----------------|
| Name:   | Email:  |                 |
| Address:  |   |                 |
| City:   | State:  | Zip:            |
| Phone:  | Permanent Phone:                                    |                 |
| Will you be 16 when the course starts?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | Date of Birth:                                      |                 |
| Are you recertifying a card? <input type="checkbox"/> Yes (please bring a copy of the card to the course) <input type="checkbox"/> WFR <input type="checkbox"/> WEMT  |   |                 |
| <b>PAYMENT</b>  |   |                 |
| <input type="checkbox"/> CHECK # _____  | <input type="checkbox"/> Credit Card (MC/VISA/AMEX) | AMOUNT \$ _____ |
| <i>If I cancel or withdraw from a course greater than or equal to 30 days prior to the course starting date, REI will retain a \$35.00 administrative fee. If I cancel or withdraw from the class within 30 days of the course start date and once the course has begun, tuition is non-refundable and non-transferable of the full tuition amount.</i> |   |                 |
| <b>Participant Signature:</b>   |   |                 |
| <b>CREDIT CARD INFORMATION (if applicable)</b>  |   |                 |
| Card Number:  | Exp. Date:  |                 |
| Name as it appears on card:   |   |                 |
| Address credit card bill is sent to:  |   |                 |
| <i>I, the undersigned, understand and agree that all course deposits are non-refundable, and non-transferable under all circumstances.</i>  |   |                 |
| <b>Cardholder Signature:</b>  |   |                 |

**Student Confirmation Package will be mailed to you at the above address.**

|          |            |           |
|----------|------------|-----------|
| CS _____ | Date _____ | Pkg _____ |
|----------|------------|-----------|