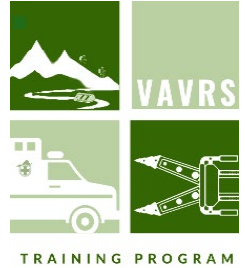




VIRGINIA ASSOCIATION OF VOLUNTEER RESCUE SQUADS (VAVRS)
2535 TURKEY CREEK RD, OILVILLE VA 23129
(804) 749-8191 / (800) 833-0602



STUDENT REGISTRATION / TESTING FORM

LAST DATE OF COURSE (MM DD YY): _____

PLEASE PRINT LEGIBLY

Enter your name as you would have it appear on your certificate

LAST NAME: _____ FIRST NAME: _____ MI: _____

LAST 4 OF SSN: _____ DOB (MM DD YY): _____ PHONE: (C) (____) - _____ - _____

EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

AGENCY AFFILIATION: _____ EMS CERTIFICATION # _____

CLASS LOCATION: _____

LEAD INSTRUCTOR: _____



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COURSE TITLE: _____ COURSE LEVEL: 1 2 3 4 (Please circle one)

IS THIS A RECERTIFICATION COURSE: Y or N (Please circle one)

LAST NAME: _____ FIRST NAME: _____

TEST BOOKLET: A or B

(Please circle one)

TEST SCORE:
GRADED BY: (initials)

EXAMPLE OF SELECTION → **XX. A ☒ C D**

1. A B C D	11. A B C D	21. A B C D	31. A B C D	41. A B C D
2. A B C D	12. A B C D	22. A B C D	32. A B C D	42. A B C D
3. A B C D	13. A B C D	23. A B C D	33. A B C D	43. A B C D
4. A B C D	14. A B C D	24. A B C D	34. A B C D	44. A B C D
5. A B C D	15. A B C D	25. A B C D	35. A B C D	45. A B C D
6. A B C D	16. A B C D	26. A B C D	36. A B C D	46. A B C D
7. A B C D	17. A B C D	27. A B C D	37. A B C D	47. A B C D
8. A B C D	18. A B C D	28. A B C D	38. A B C D	48. A B C D
9. A B C D	19. A B C D	29. A B C D	39. A B C D	49. A B C D
10. A B C D	20. A B C D	30. A B C D	40. A B C D	50. A B C D