



*Southwest Virginia EMS Council, Inc.*  
**AHA Equipment Request**



**American Heart Association®**  
*Learn and Live*

Pick up date:

Drop Off date:

Questions call/email [latwell@vaems.org](mailto:latwell@vaems.org)/ 276-628-4151

Your Name:

Your Course #:

Your Telephone:

Your email:

### **BLS Request**

How many manikins will you need? Adult:            Child            Infant

How many AED's will you need

Will you need a DVD? If so Heartsaver (HS) or Health care provider (HCP)

How many books will you need?

Special Request

### **ACLS Request**

**Will you need a DVD?**

How Many Manikins will you need?

How many student books will you need?

Special Request:

### **PALS Request**

Will you need a DVD?

Will you need manikins?

How Many Student Books will you need?

Special Request:

All Fields must be complete or your equipment request will be rejected. After completion please email to [latwell@vaems.org](mailto:latwell@vaems.org)