



RESCUE DYNAMICS
5109 - 17A Avenue NW
Edmonton, Alberta
T6L 1K5
(780) 461-5040 phone / fax

website: <http://www.rescuedynamics.ca>

WILDERNESS EMERGENCY CARE COURSE
ADVANCED FIRST AID

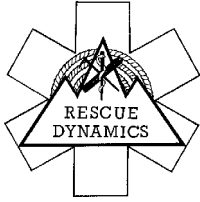
COURSE OUTLINES
COURSE APPLICATIONS

subject to revision without notice

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Wilderness Emergency Care Program – Refresher Application

Name: _____ Date: _____

Mailing Address: _____

City: _____

Province (State / Country): _____ Postal Code _____

Phone - Home: _____ Work: _____

Fax: _____ Cellular: _____

Email: _____

Highest Grade Attained: 10 11 12 13 GED or College / University: _____

AGE: <18 (specify:____) 18 - 25 25 – 35 35 – 45 45 – 55 55 – 65 >65

Date of WEC refresher you wish to attend: _____

If the course is full, would you like to be placed on a waiting list ? YES NO

List the last WEC (or approved equivalent advanced 1st Aid) and CPR course (or refresher) you attended. Include the date, year, location, certificate granted and certifying body:

1st Aid: _____

CPR: _____

I HAVE PROVIDED PROOF OF COMPLETION OF THE FOLLOWING PREREQUISITES:

- Photocopy of CURRENT CPR Certificate including adult, infant, child, 1 & 2 person CPR
- Photocopy of WEC or higher certificate or proof of successful program completion

ACMG Certification Level : MG SG AG RG AAG ASG ARG BG HG CGI

I hereby authorize Rescue Dynamics to disclose my marks or course status to the following persons:

- employer ACMG / ACSKG for purposes of exam eligibility verification
- Thompson Rivers University Parks Canada for business licence eligibility verification
- _____

signature _____

NOTE: If paying by MasterCard® or VISA® be sure to complete and attach the credit card payment form.

For Office Use Only:	Written	%	Rescue	%
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