

NAME

TITLE

AGENCY

LANGUAGE(S)

PHONE

EMAIL

STREET ADDRESS

CITY, STATE, ZIP

PALS FOR HEALTH

REGISTRATION FORM

40 HOUR HEALTHCARE INTERPRETER TRAINING

PLEASE FAX REGISTRATION FORM TO:
Andrea Estrada
at PALS for Health
FAX: (213) 553.1876

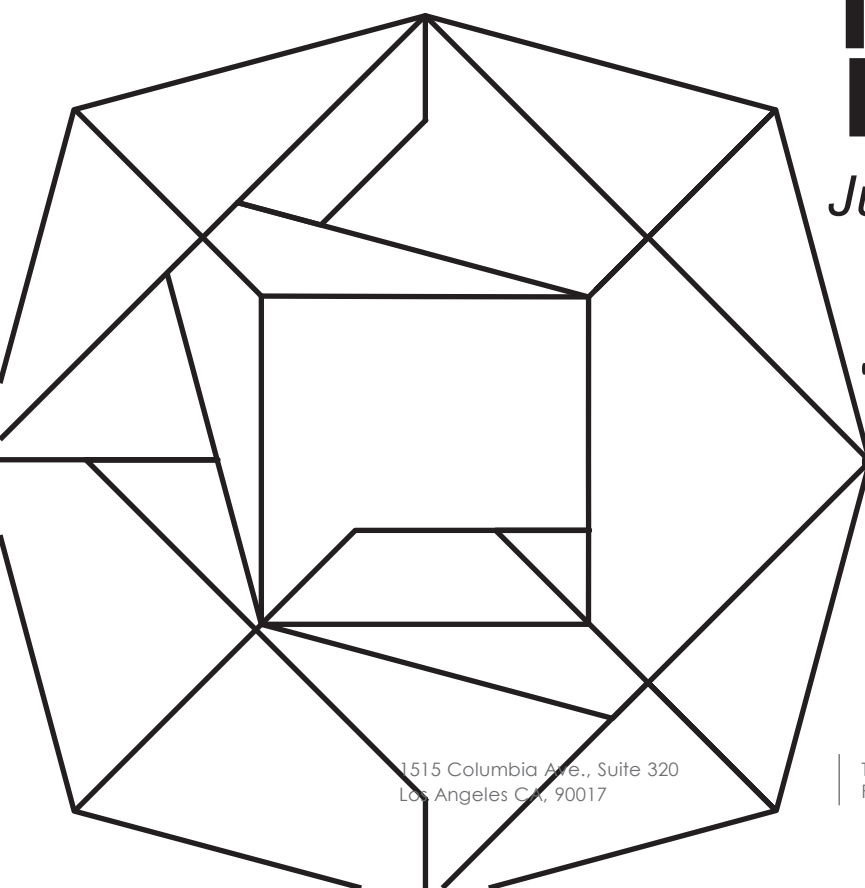
FOR MORE INFORMATION PLEASE CONTACT:
Andrea Estrada
andreae@palsforhealth.org
(213) 553.1818

2019 TRAINING DATES:

July 17, 24, 31, August 7, 14

PLEASE CALL THE OFFICE FOR TESTING DATES

TRAINING PARTICIPANTS MUST PASS PALS FOR HEALTH'S 2.5 HOUR PROFICIENCY TEST AS A PREREQUISITE TO THE TRAINING.



1515 Columbia Ave., Suite 320
Los Angeles CA, 90017

T. 213.553.1818
F. 213.553.1876

E. info@palsforhealth.org
www.palsforhealth.org

