

NAME

TITLE

AGENCY

LANGUAGE(S)

PHONE

EMAIL

STREET ADDRESS

CITY, STATE, ZIP



**REGISTRATION
FORM**

40 HOUR HEALTH CARE
INTERPRETER TRAINING

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

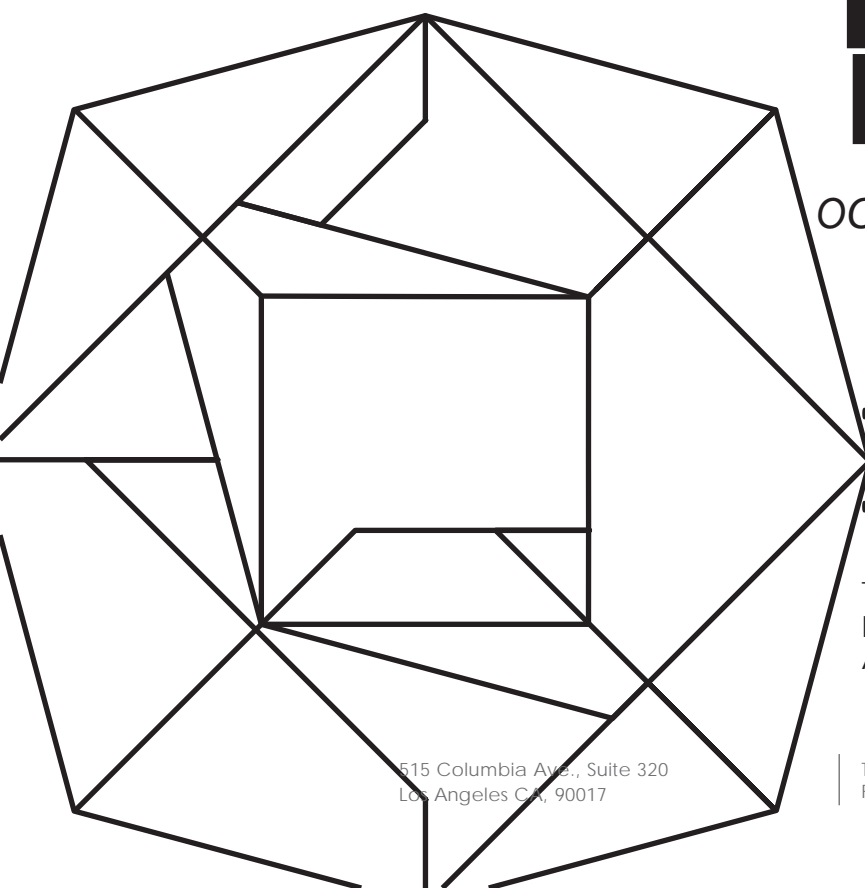
**FOR MORE INFORMATION
PLEASE CONTACT:**
 Andrea Estrada
andreae@palsforhealth.org
 (213) 553.1818

2018 TRAINING DATES:

OCTOBER 17,24,31 NOVEMBER 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.



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

T. 213.553.1818
 F. 213.553.1876

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

