

Registration Form

BASIC LIFE SUPPORT COURSE (BLS)

DATE OF REGISTRATION

PERSONAL INFORMATION

/ /

Title: Dr Mr Ms

Gender: Male Female

Full Name:

Mobile Number:

Atlas Registered Email ID:

Organization / Company Name:

Are you doing the course: First Time Renewal

Profession: Doctor Nurse Allied Staff Other: _____

License: DHA MOH DOH Other

S.No	DATE	DAY	TICK YOUR DESIRED COURSE DATE
1	3rd June 2026	Wednesday	
2	6th June 2026	Saturday	
3	10th June 2026	Wednesday	
4	13th June 2026	Saturday	
5	18th June 2026	Thursday	
6	24th June 2026	Wednesday	
7	25th June 2026	Thursday	

Send the filled & signed registration form along with the payment receipt to our email accounts:
info@eduscope.me / lifesupport@eduscope.me

MODE OF PAYMENT:

1. CASH PAYMENT: You can visit us in our Training Center
2. CHEQUE PAYMENT: Payable to Eduscope International FZ LLC (cheque should be cleared 5 days before the course date)
3. BANK: through (a) Cash deposit Emirates NBD ATM (no charge); (b) Bank transfer.

BANK DETAILS	
Account Name	Eduscope International FZ LLC
Account No.	101 4146935401
Bank	Emirates NBD
Branch	Wafi Mall
Swift Code	EBILAEAD
IBAN No.	AE 900260001014146935401

- Request for re-issuance of the certificate in case of losing it is **AED 50/-**.

Eduscope International has the right to cancel or reschedule a specific course. In case of cancellation/ rescheduling, the candidates will have an opportunity to select alternative courses. **NO REFUND POLICY IS APPLICABLE.**

RESCHEDULE POLICY:

- Rescheduling requests via email are to be sent at least 8 days prior to the training date to assist the replacement candidate to be prepared for the session after completion of the online session. The rescheduling request will be entertained only by email.
- Rescheduling of the course is permitted only "once "and with valid reason and supporting document
- Rescheduling the course due to emergency reasons will be approved ONLY with supportive documents.
- **Course will be considered forfeited if the candidate does not show up for the session or If the candidates fails to complete the online portion and submit the online completion certificate a day prior to the practical session.**
- Latecomers will not be entertained after the commencement of the session.
- "NO REFUND POLICY" is permitted.

REMARKS:

- Notify our team if you suffer from any Medical Issues OR physical limitations to perform the practical skill test.
- Ladies, please inform our team if you are you pregnant: Yes No

If yes (please specify): No of weeks: _____

I HEREBY CONFIRM THAT I HAVE READ AND UNDERSTOOD THE ABOVE-MENTIONED POLICY.

Signature: _____

Date: _____