Steven M. Neuhaus
County Executive

FREE TRAINING FOR ORANGE COUNTY TEENS/YOUNG ADULTS!

Heartsaver First Aid with CPR/AED

Provided by **Orange County Div of EMS Education**

Date:	**December 30th**, 2026
Time:	9:00 a.m.-4:00 p.m. (Lunch/light refreshments will be provided)
Location:	Emergency Services 911 Center 22 Wells Farm Road, Goshen, NY
Who:	Individuals aged 14 through 20 who live, attend school, volunteer, and/or work in Orange County

Pre-registration is required, and space is limited. If you need a hard copy of the registration mailed to you in order to complete and return it, please contact Linda Seppey.
Please register as soon as possible as classes fill up quickly!
To register: Please complete the attached form and email it to the Youth Bureau by Dec 11th.
For more information, please call the Youth Bureau on 845-862-6700
or email Lseppey@orangecountyny.gov
Note: A confirmation email will be sent to you within 2 business days after receiving your registration. If you don't receive one, please contact Linda Seppey on 845.862.6700.

About this training:

Cardiopulmonary Resuscitation (CPR) is a life-saving skill and a crucial component in the chain of survival for individuals in cardiac arrest. CPR provides life sustaining oxygen to the brain and vital organs which can be irreversible damaged within minutes. An individual's ability to recognize the signs and initiate CPR while awaiting the arrival of EMS could not only be the difference between life and death but also the quality of that life saved. The First Aid segment will teach participants to recognize the onset of stroke, control bleeding, administration of naloxone (when an opioid overdose is suspected), and epinephrine for an individual suffering an extreme allergic reaction.

American Heart Association.

Please join us to learn these critical lifesaving skills.

Attendees who complete the program will receive
a Certificate of Completion from the American Heart Association, along with a personalized first aid kit.

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REGISTRATION FORM

FREE Heartsaver First Aid with CPR/AED

Provided by **Orange County Div of EMS Education**

Wednesday, December 30th, 2026, 9:00 a.m.- 4:00 p.m.
at the Emergency Services 911 Center
22 Wells Farm Road, Goshen, NY

PRE-REGISTRATION REQUIRED BY Dec. 11th, 2026

Please TYPE or WRITE CLEARLY so we can easily READ!

1. Name of Participant (first and last name):

2. Email Address:

3. Cell Phone:

4. Home Address (include street, city, state, & zip code):

5. Age:

6. Emergency Contact (name & number):

7. Dietary Needs (if any):

8. School/Volunteer Org/Job in Orange County:

Questions or concerns and/or if you need a hard copy of the registration mailed to you in order to complete and return it, please contact Linda Seppey by calling the Youth Bureau at 845-862.6700 or emailing Lseppey@orangecountyny.gov.

****PLEASE COMPLETE ALL INFORMATION ON BOTH THE REGISTRATION AND CONSENT FORMS****

CONSENT FORM

***Please scan and email to youthbureau@orangecountyny.gov and bring original with you to the training. If you don't receive a confirmation email within 2 business days after submitting your registration, please give us a call at 845-862.6700.**

***Youth/Young Adult Agreement:** I, (name) _____ understand that this free training is being offered to teens/young adults ages 14 years through 20 who live and/or attend school, and/or work in Orange County to learn critical lifesaving skills. I understand that there are limited slots available for this training and if the training is full, I will be provided with additional training opportunities. If I am placed into this training, I commit to the full amount of time for the training **from 9:00 a.m. to 4:00 p.m. on Wednesday, Dec 30th, 2026.** I have reliable transportation to get to and home from this training.
As photographs/videos/interviews may be taken/conducted during the training, I also give consent for such photographs/videos of and interviews that include me to be used for the purpose of advertising and reporting about programs affiliated with the County of Orange, including the Orange County Youth Bureau. This may include, but is not limited to, inclusion in newsletter/paper articles, website, and/or Facebook.

Youth/Young Adult Applicant's Signature:

_____

***If under 18 years of age, Parent/Guardian's Consent:**
I, (print parent/guardian's name) _____ give consent for my youth to participate in this training co-hosted by Orange County Emergency Services and the Orange County Youth Bureau. As photographs/videos/interviews may be taken/conducted during the training, I also give consent for such photographs/videos/videos of and interviews with my youth,
(Print **youth's name:**) _____

***Parent/Guardian Signature:**

_____

***Please scan and email to youthbureau@orangecountyny.gov and bring original with you to the training. ***