



Advanced Wilderness Life Support Application November 10, 11, 12, 2022

Thank you for your interest in attending the KRMCM's 2022 AWLS course:

Applicant Information		
Name:		
Email Address:	Phone:	
Mailing Address:		
City:	State:	Zip:
Emergency Contact		
Name:	Phone:	Relationship:
Signature:		

Resident/Student or Non-Doctoral	\$ 450.00
Doctoral	\$ 695.00

Submit fee for the course along with this application by November 1st to secure your spot. Payment must be made by check payable to: **“Kingman Regional Medical Center – Graduate Medical Education 8060”**

And mailed to:
Kingman Regional Medical Center
Attn: Sheri @ Graduate Medical Education
3269 Stockton Hill Road
Kingman, AZ 86409

FOR OFFICIAL USE ONLY:

Payment Date: _____ Check Number: _____

Roster: _____

