

Permission to Issue AHA Certification eCard

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Student's Full Name

is participating in an American Heart Association (AHA) certification course.

Upon successful completion the student will receive a certification card via the AHA secured eCard site.

The issuing of a certification eCard requires use of the student's email/cell phone to receive the certificate. As a minor the instructor needs a parent/guardian's approval to collect this information for students under the age of 13.

Only the student, the instructor, AHA Training Center and AHA has access to this information.

This student has my permission to participate in an American Heart Association course.

I give my permission to collect this data for purposes of certification and acknowledge that this data will not be shared with any other entities.

By (authorized signature <b>and</b> printed name)
Parent/Guardian
Date