

PALS MATERIALS ORDER LIST
TWO WEEKS NOTICE REQUIRED FOR ALL ORDERS*
***PAYMENT MUST ACCOMPANY ORDER**

HEALTH EDUCATION STRATEGIES, LLC
 11460 Telegraph Rd, Taylor, MI 48180
 734-288-3050/734-250-7951 (Fax)
www.healtheducationstrategies.com

H.E.S. Instructor Name: _____

(please print name)

Contact Phone Number: _____

Email: _____

Order Date: _____ Order Pick Up Date: _____

Or

Shipping Address: _____

City, State, Zip Code: _____

Order Ship Date: _____

PALS WORKBOOKS-MANUALS-BOOKLETS

QTY	ITEM#	ITEM DESCRIPTION	ITEM PRICE	TOTAL
	20-1119	PALS Provider Student Manual (Print)	\$53.50	
	20-3120	PALS Provider Student Manual (eBook)	\$47.00	
	20-3555	Heartcode PALS	\$150.00	
	20-1101	2020 AHA Guidelines for CPR/ECC (Print)	\$28.00	
	20-3104	2020 AHA Guidelines for CPR/ECC (eBook)	\$24.00	
	20-1100	2020 Handbook of ECC (Print)	\$32.00	
	20-3105	2020 Handbook of ECC (eBook)	\$28.50	

INSTRUCTOR MATERIALS

	20-1113	PALS Instructor Package w/ DVD	\$230.00	
	20-1139	PALS Instructor Package w/ Digital Video	\$161.00	
	20-1117	PALS Instructor Manual (Print)	\$58.50	
	20-3122	PALS Instructor Manual (eBook)	\$55.00	

COURSE DVD'S-VIDEOS

QTY	ITEM#	ITEM DESCRIPTION	ITEM PRICE	TOTAL
	20-1114	PALS Course DVD	\$99.00	
	20-1424	PALS Course Digital Video	\$90.00	

WE ACCEPT VISA/MASTERCARD/DISCOVER CREDIT CARD PAYMENTS

Card Number: _____	Expiration (Mo/Yr): _____
Total Amount Authorized: \$ _____	Security Code: _____ (Located on Back of Card next to Signature Line. Usually 3 or 4 digits.)
Cardholder Name: _____	
Cardholder Billing Address: _____	
I agree to pay above amount according to card issuer agreement.	
Cardholder Signature: _____	
Email for Invoice: _____	

MISCELLANEOUS

QTY	ITEM#	ITEM DESCRIPTION	ITEM PRICE	TOTAL
	20-1118	PALS Reference Card Set	\$12.50	
	20-3121	PALS Digital Reference Cards	\$9.50	
	20-1115	PALS Emergency Crash Cart Cards	\$29.00	
	20-1116	PALS Poster Set	\$65.00	
	15-1501	AHA Stopwatch	\$10.00	
	WL3120	Practi-Shields 200ct/box	\$54.00	
	WL3136	Practi-Shields 36ct/box	\$11.00	
	820019	Pocket Mask w/Yellow Case	\$20.00	
	252-103	AMBU RES-CUE Mask (Red Case)	\$15.00	
	WP-402	CPR Micromask w/Blue Case	\$20.00	
	WP-550	PathoShield Key Chain	\$10.00	
		CPR Microshield	\$7.00	

SUB-TOTAL	\$
ADD 6% SALES TAX If tax exempt, include Tax ID #	
ADD SHIPPING FEE (See fees below)	
GRAND TOTAL	\$

*SHIPPING FEES (Not Needed for Digital Content)

(Updated 11-2020)

DVD'S/Misc	(under \$100)	\$18.00
DVD'S/Misc	(over \$100)	\$22.00
Manuals:	1-10	\$30.00
	11-25	\$35.00
	26-50	\$40.00

For office use only

Amt Pd: _____ Cash Credit Card Check Money Order # _____ Date _____
 Pmt Rec'd _____ Invoice# _____ Invoice Enclosed Invoice Emailed _____

NOTE TO INSTRUCTORS
FOR COURSE COMPLETION CARD ORDERS, PLEASE USE THE AHA COURSE COMPLETION CARD ORDER FORM.
FOR EQUIPMENT RENTAL, PLEASE USE THE EQUIPMENT RENTAL FORM.

Updated 11/18/2020