

VIRTUAL EPI-PEN & MED ADMIN TRAINING



Thursday, June 11 **OR** Tuesday, June 16
(participants must choose one date)

EPI-PEN (\$50) 6:00 - 7:00 PM: Epi-Pen training will teach you to recognize signs and symptoms of severe allergic reaction and understand appropriate handling, use, and disposal of epinephrine auto & nasal injectors. Municipalities are authorized by the State to have staff certified in Epi-Pen administration without taking the full medication course. This certification is good for 1 year.

*Note: This course requires demonstration of the injection skill using a training injector which can be purchased from a variety of sources online, including Amazon - search for "epi pen trainer". Alternatively, trainers can be found [here](#) or [here](#). Following the course, the participant should video record themselves demonstrating the skill and **upload** the recording with their email, name, and organization to, www.communitycamps.com/epidemos **NO LATER THAN 14 calendar days** following the course date. Once this is received and reviewed, the final course completion certificate will be sent out.*

MED ADMIN (\$52) 7:00 - 8:30 PM: The CT Department of Public Health mandates that all youth camps administering medications to campers comply with the requirements set forth in CT statute and regulations. Learn what this means for your camp and become certified to dispense medication at your camp site. This certification is good for 3 years.

Please note: CRPA will make every effort to ensure accuracy of certificates. Any certificate discrepancies must be reported within 14 calendar days of receiving the certificates and within 90 days of the course date. Discrepancies beyond this timeframe cannot be guaranteed to be remedied. It is the sole responsibility of the registrant and/or Departments/Organizations to maintain record of certificates year to year, CRPA is not responsible for maintaining records once they are sent to departments.

BUNDLE & SAVE! REGISTER FOR BOTH COURSES FOR JUST \$67!

REGISTRATION INFORMATION:

**If registering more than 10 participants, please use additional forms. Organizations must register their staff, personal registrations will not be accepted.*

Town/Org: _____ Contact: _____

Phone: _____ Email: _____

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|-----------|-------------------------------------|-------------------------------------|--------------------------------------|----------------------------------|----------------------------------|
| 1. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 2. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 3. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 4. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 5. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 6. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 7. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 8. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 9. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |
| 10. _____ | <input type="checkbox"/> Epi (\$50) | <input type="checkbox"/> Med (\$52) | <input type="checkbox"/> Both (\$67) | <input type="checkbox"/> 6/11/26 | <input type="checkbox"/> 6/16/26 |

PAYMENT OPTIONS: *NOTE: Zoom meeting access information will NOT be provided unless payment is received.*

Check (payable to: "CRPA," 135 Day St., 2nd Floor, 2H, Newington, CT 06111) **Invoice** **Credit Card**

CANCELLATION & REFUND POLICY:

There will be no refunds for cancellations after **5/22/26**. Cancellations must be received in writing via email to info@crpa.com or val@crpa.com. Registrants that do not participate in the meeting without cancelling prior to this date will be billed the **full amount**.

Please contact CRPA with any questions: 860 721 0384 | info@crpa.com | www.crpa.com