



**CPR Savers and First Aid Supply
AED Grant Program**

Thank you for your interest in the CPR Savers AED Grant Program.

Please complete the following form and submit it via fax, email or mail.

Mailing Address: CPR Savers and First Aid Supply
7904 E. Chaparral Road
STE A110-242
Scottsdale, AZ 85250

Email: service@cpr-savers.com

Fax: 480-946-2457

Please provide the following information on the organization or individual requesting information:

Last Name:	
First Name:	
Title:	
Company/Institution:	
Department:	
Address:	
Address 2:	
City:	
State/Province:	
Postal Code/Zip:	
Country:	
Telephone:	
Fax:	
Email:	

Product and Placement Information:

- The number of AEDs needed:

- Brand of AED requested: (Check the box next to the brand of your choice)
Heartsine:
Philips:
Defibtech:
Cardiac Science:
Zoll:
Medtronic:
Welch Allyn:

- What type of location will the AED be placed? (Public, office, etc...)

- What type of accessories will you need? (check the box next to the accessories you will need)

Extra Battery:
Extra Adult Pad:
Extra Infant/Child Pads:
Wall Cabinet:
Wall Bracket:
Carry Case:
Wall Sign:
Fast Response Kit:
Other:

- Do you currently have any AEDs in your facility?

- Have you been offered an AED Grant before?

- Will AED Program Management be needed? (For Example: Our online software tracks all of the necessary AED maintenance, expiration of pads & batteries, and employee training to ensure both the equipment and staff are rescue ready.)

- Will CPR/First Aid/AED Training be needed? (CPR Savers offers on-site training)