



On-Site Class Policies, Pricing, and Contract

Thank you for your interest in hosting a class instructed by STaR Volunteer Ambulance. We are honored to be able to offer training to the community and look forward to working with you to hold a class that will be convenient and informative! Please read the following information carefully and make sure any questions you have are addressed prior to the class date.

General Information

- We define an “on-site” class as any class requested by a business, organization, or group held at a location chosen by the requesting party.
- Generally speaking, our classes are available to any business or organization within 30 miles of Prospect, NY, but only north of the Utica and Rome areas. The mission of our program is to provide education to rural areas, therefore we do not offer classes in or directly outside of cities. If you are unsure if your organization qualifies, please contact us to confirm.
- All on-site classes require a minimum of 5 attendees. Classes requested for fewer than 5 people may increase the cost per person.
- We reserve the right to decline to teach a class at any time, for any reason.

Pricing

All pricing is per person and is based on a minimum attendance of 5.

Pricing is effective as of 1/1/2024 and is subject to change without notice.

Adult and Pediatric CPR & AED	\$45	<i>2 hours</i>
Adult and Pediatric First Aid	\$50	<i>3 hours</i>
BLS	\$45	<i>2 hours</i>
Bloodborne Pathogens	\$30	<i>1 hour</i>
Child and Babysitting Safety	\$70	<i>6 hours</i>
Wilderness First Aid	\$140	<i>16 hours</i>
Advanced Cardiac Life Support:	\$70	<i>6 hours</i>



Payment

Payment for classes will be required as follows:

- An invoice based on the estimated attendance will be provided prior to the class date.
- Invoices must be paid no later than one week following the class.
- Payment may be made in advance based on the estimated attendance number, however, if the actual attendance number is less than what was estimated a refund may not be provided.
- Payment will be accepted in the form of checks ONLY.
- STaR Volunteer Ambulance reserves the right to withhold verification of certification from class attendees until full payment is made by the responsible party.

Contract for Class Instruction

All parties hosting classes will be required to sign a contract for service with STaR Volunteer Ambulance to ensure both parties are fully informed of the expectations for the class and to provide documentation in the unlikely event of a complaint brought by either party. A blank contract is attached for reference; you will be provided with your contract to review and sign before your class date.

Class Locations & Facility Requirements:

Acceptable locations for classes may include public buildings (town halls, libraries, etc.), private businesses or meeting halls, first responder stations (fire, police, or EMS), or similar locations. Classes will not be held in private residences.

The following is required of the intended class space:

- In general, an open indoor space that is clean, dry, well-lit, and reasonably quiet
- An area of appropriate dimensions for the planned class size (approximately 20-25 square feet per person is recommended).
- An appropriate amount of seating and tables or desks so that each attendee has an individual space to sit and write.
- Reliable internet access.*
- A large television or projector screen with the ability to connect to a laptop.*
- Speakers with appropriate volume levels for the setting, if applicable.*
- Access to the facility must be available 30 minutes before and following the scheduled class start and end times, respectively.



If the party requesting a class does not have access to an appropriate facility, STaR Ambulance will assist in securing a facility, within reason.

*While not ideal, classes can be held in locations without internet or other required technology if there are no other viable options.

General Class Rules & Requirements

- All class attendees are expected to maintain themselves politely and respectfully. Disruptive or disrespectful behavior will not be tolerated.
- Any attendee persistently disrupting the class will be asked to leave without receiving certification and with no refund provided.
- Attendees are expected to remain attentive and receptive to the information being taught. Attendees must complete all aspects of the class to the satisfaction of the instructor to receive certification.
- The use of cell phones or other electronic devices during the class is strictly prohibited.
- Questions and discussion are encouraged during appropriate times. Instructors will be available for a short time following the class to answer any unaddressed questions or provide further demonstration of any skills an attendee may request.
- Reasonable accommodations will be made for any individuals with disabilities attending a class, following all state and federal laws.

Refund and Rescheduling Policy

In the event a class cannot be held as planned due to adverse weather, instructor illness/injury, or another event outside of the control of the hosting party, the class may be rescheduled or refunded in full.

If the hosting party requests a class be rescheduled, STaR Volunteer Ambulance instructors will work with the party to determine an alternate date.

The hosting party may request that a class be canceled due to lack of interest, issues with the hosting facility, unexpected conflicts, etc. The following refund policy will apply for cancellation requests from the hosting party:

- If the hosting party requests the cancelation with more than 48 hours' notice a full refund will be issued or the invoice voided.
- If the hosting party requests the cancelation with less than 48 hours' notice no refund will be provided.



No refunds will be issued following the successful completion of a class, except where noted below.

Complaints

If the hosting party or an attendee has a complaint against an instructor, that complaint should be relayed in writing to the administration of STaR Volunteer Ambulance within one week following the class. All complaints will be investigated and handled following STaR Volunteer Ambulance's disciplinary policy. If it is determined that the instructor failed to perform their job per company standards, the attendee or hosting party may be entitled to a partial refund for the class or offered another class free of charge based on the specific situation, and the instructor will be disciplined as appropriate.

Provision of Certification Cards

Certification cards are provided in either physical or electronic form based on the class. If one format is preferred over the other please inform us when scheduling your class.

Liability

All liability relating to class attendees and/or the hosting facility will be held by the hosting party. Liability for the instructor(s) and equipment will be held by STaR Volunteer Ambulance.



Contract for Course Instruction

This contract, between STaR Volunteer Ambulance and _____,
is for the provision of the following course(s):

- | | |
|---|---|
| <input type="checkbox"/> <i>Adult and Pediatric CPR & AED</i> | <input type="checkbox"/> <i>Child and Babysitting Safety</i> |
| <input type="checkbox"/> <i>Adult and Pediatric First Aid</i> | <input type="checkbox"/> <i>Advanced Cardiac Life Support</i> |
| <input type="checkbox"/> <i>BLS Provider CPR & AED</i> | <input type="checkbox"/> <i>Wilderness First Aid</i> |
| <input type="checkbox"/> <i>Bloodborne Pathogens</i> | |

To be held on the following date(s): _____

Hosting facility address: _____

Hosting Party Contact Name & Title: _____

Phone Number: (____) _____ Email: _____

Alternate Contact Name: _____

Phone Number: (____) _____

Estimated attendance: _____ Estimated Total: \$ _____

Do you wish to allow outside parties to attend your class at their own expense? Yes / No

I certify that I have reviewed, and agree to abide by, the standard policies and procedures of the STaR Volunteer Ambulance Community Training Program. I hereby assume financial responsibility for the requested course(s) and agree to provide payment per the outlined payment policy. I understand that I will be provided with a copy of all applicable policies as well as this signed contract.

Name: _____ Title: _____

Signature: _____ Date: _____



~~For STaR Administration~~

Final number of attendees: _____ Total Payment Received \$ _____

Check Date: _____ Check Number: _____ Bank: _____

Instructor(s): _____

Disposable Supplies Used: _____

Notes: _____
