



**Saskatchewan
Health Authority**

Kinetik
8th Floor, Saskatoon City Hospital
701 Queen Street
Saskatoon, SK S7K 0M7
Tel: (306) 655-8974
Fax: (306) 655-7878



kinetikrehab.com
kinetik@saskhealthauthority.ca

**EMT Screening Assessment and Functional Evaluation (EMT-SAFE)
Registration Form**

Name:	_____		
Address:	_____		_____
	Street		City
	_____		_____
	Province		Postal Code
Phone:	_____		_____
	Home		Work
Date of Birth:	_____		

List of medications that you are currently taking, as some medications may affect heart rate during cardiovascular and functional testing:

There is a \$200.00 fee for assessment

Please pay the \$200.00 fee on the day of assessment at the Kinetik reception. Payment may be made by Debit, MasterCard or VISA. Bring your registration form and your signed medical consent form with you to Kinetik on the day of your pre-booked testing appointment.

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If you have questions please call (306)655-8974.