



AED Registration Form

In the Toronto area, fax completed form to: **416-392-2100**
 or e-mail to: AEDregistrations@toronto.ca
 Questions? Call: 416-392-9833

Outside of Toronto, please forward this form to your Local EMS

Initial Registration Update Form

Registration Date	(mm/dd/yyyy)		
Name of Facility			
Site Address	AED Locations		
	1	_____	
	2	_____	
	3	_____	
	4	_____	
Are you aware of additional AED's in your facility?	<input type="checkbox"/> NO	<input type="radio"/> YES (Locations) _____	
Do you wish to be notified if a medical emergency occurs elsewhere within your location?	<input type="checkbox"/> YES		<input type="checkbox"/> NO
Internal Emergency Response Phone Number ***Mandatory Field***	Phone Number		Extension
	Should a 911 call come in from this site, the 911 Dispatchers may call this number to ensure the internal emergency response plan has been activated with the AED (i.e. Switchboard, Security Office, etc.)		
Operating Hours	Weekdays		Weekends
Site Contact Name			
Phone Number			

Toronto EMS Communications Centre is committed to protecting the privacy of your personal information. However, the location of your AED may be shared in an emergency or with the Provincial Government for a province wide registry.