

Lifeguarding Application/ Information

Please write legibly. This form is what's used to apply for your certification upon successful completion of the course.

Student Name: _____

Please CAREFULLY read the attached "Letter to Lifeguarding Course Participants"; address questions to the instructors.

Provide the following information-complete all sections.

Home address: _____

Date of Birth: ____ / ____ / ____ Cell Phone: () ____ - ____

Email Address: _____

Medical Condition(s): _____

EMERGENCY CONTACT:

Name: _____

RELATIONSHIP: _____

CONTACT NUMBER: () ____ - ____

I have read the attached letter to lifeguard participants and understand the following:

- The course involves strenuous activity at times
- The Lifeguard manual is required reading. A digital version of the text will be brought to class as instructed unless otherwise requested.
- Refunds will not be given to any participant who does not successfully complete the prerequisites, final in-water skill scenarios and/or final written exams with a score of 80% or higher.
- **Class attendance is mandatory for all dates and times listed**
- The instructor(s) has/have the right to remove any participant from the course for reasons including but not limited to unsafe or inappropriate behaviors.

Student Signature

Date

Parent/Guardian Signature (If participant is under age of 18)

Date