



TOGETHER EVERYONE ACHIEVES MORE

Lifeguard Training-Recertification Class

Presented by:

Cabot Parks and Recreation and the American Red Cross

Lifeguard Pre-test for Lifeguard Training & Recertification

- Swim 300 yards using a combination of front crawl or breaststroke... Swim 20 yards front crawl or breaststroke and retrieve a 10lb. object... (2) Minute Water Tread in deep water without the use of your arms/hands.

Participants MUST perform the following skills:

- Adult/Child/Infant CPR-AED Training for the Professional Rescuer. First Aid Skills (Multiple) Passive/Active Drowning Victim Rescues, both shall and deep water, on top of the water and fully submerged. Head/Neck/Spinal Injury Rescues, Shallow and Deep water plus on land. Bloodborne Pathogen Training Effective Scanning Skills Basic Facility Safety Protocols to aid in effectiveness of total pool operation. Adult/Child/Infant Conscious, unconscious and pregnant Choking victim rescues Waterpark Lifeguard Skills

Must have proof of age, swim suit, CPR Adult/Infant Mask, Notepad & Pencil or Pen and any food and drink you will need.

Class Date: 4/12/2019-4/13/2019

Friday, April 12th: 5-8 pm (Pre-Test 1st.)

Saturday, April 13th: 9am-2pm, or whenever the class is completed.

Cost of CPR Adult/Infant Mask \$13.00-NOT INCLUDED IN \$150.00 FEE

Registration fee MUST BE PAID IN FULL

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Name: \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_

List any special need or medical conditions/allergies we need to be aware of: \_\_\_\_\_

I grant permission to managing personnel to authorize and obtain medical care from any licensed physician, hospital or medical clinic should I or my child become ill or injured while in training.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent/Guardian (if participant is under the age of 18): \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Cash Card Check# \_\_\_\_\_ Receipt Number: \_\_\_\_\_

There will be a \$25.00 processing fee to complete a refund. Refunds requested within 2 weeks of the class start date will be denied.