

CIRCLE C AQUATICS PROGRAM REGISTRATION FORM STANDARD LIFEGUARD CERTIFICATION COURSE



Please type or print information legibly

This form is to register for the program indicated above. Registration may also be done online www.ccswim.net.

A Resident/Non-Resident Information Form must be submitted prior to this Registration Form.

	71 Resident	Tion Resident Information I	orm must be submitted prior to this	10510000011 01111.	
Program Infor	mation				
Program Year_	2019	Session Desired:	Session Dates: See Reverse		
Registration Fee	e:_ \$50	Program/Course Fee: \$	195		
emergencies sudden illne	rticipants wi s and to prov sses until em	th the knowledge and side professional level ca nergency medical service	rding Certification Course is kills to prevent, recognize ar are for breathing and cardia es (EMS) personnel take ove ll be Orientation and Trainin	nd respond to aquatic c emergencies, injuries and	
Registrant Info	ormation_	Resident	Non-Resident		
Name:			Age (must be a	t least 15 years old):	
Phone:		Email:			
Fees and Polic	cies — Initials re	equired next to each state	ment		
	I understand that I must successfully complete the Pre Course before moving on to the Lifeguard Class.				
	I understand that I must attend and participate in all class sessions and there are no makeup days for missed classes.				
	I understand that I must attend and participate in all Orientation and Training days to be eligible for employment with Circle C Aquatics.				
	I understand that I must demonstrate competency in all required skills, activities, and final rescue scenarios.				
	I understand that I must pass both final written exams with minimum scores of 80 percent.				
	I understand that program dates and times are subject to change.				
	I understand that completion of this course does not guarantee employment with Circle C Aquatics.				
	I understand that this course, if successfully completed, will result in an American Red Cross certification that will be valid for a period of <u>two years</u> at any organization that recognizes the American Red Cross lifeguarding program.				
	all liabilities for a	ny injury which may be suffered	ers Association, Inc. / Circle C Aquatic by me or by my wards/guests arising ou	s and its officers and employees from and to of or in any way connected with	
Signature of Participant: Date:					
If participant i			n signature is also required belo	w:	
Print Parent/Guard	ian Name	Parent/0	Guardian Signature	Date	
		<u>C</u>	Office Use Only		
RIF/NRIF o	on File R	egistered in Daxko: R	Reg. Date: Form in Progra	am Coordinators box FD:	
Confirmatio	on Email Sent	Confirmation Received	PC:		



CIRCLE C AQUATICS CLASS SCHEDULE STANDARD LIFEGUARD CERTIFICATION COURSE



For participants applying for employment with Circle C Aquatics, there will be a 4-hour Orientation and Training on the last day of a session. All applicants are required to attend the Orientation and Training Day before starting employment.

Session	Date	Time	
1	Saturday 2/23 - Friday 3/1	Saturday- Sunday 10:30A - 7:00P,	
-	Saturday 2/23 - Triday 3/1	Monday-Friday 5:30P - 9:00P	
2	Saturday 3/9 – Friday 3/15	Saturday- Sunday 10:30A - 7:00P,	
	Saturday 3/3 – Friday 3/13	Monday-Friday 5:30P - 9:00P	
3	Saturday 3/30 — Friday 4/5	Saturday- Sunday 10:30A - 7:00P,	
	Saturday 3/30 – Friday 4/3	Monday-Friday 5:30P - 9:00P	
4	Saturday 4/27 – Friday 5/3	Saturday- Sunday 10:30A - 7:00P,	
4	Saturday 4/27 – Triday 3/3	Monday-Friday 5:30P - 9:00P	
5	Saturday 5/11 – Friday 5/17	Saturday- Sunday 10:30A - 7:00P,	
3	Saturday 3/11 - Triday 3/17	Monday-Friday 5:30P - 9:00P	
6	Saturday 6/1 – Friday 6/7	Saturday- Sunday 10:30A - 7:00P,	
		Monday-Friday 5:30P - 9:00P	