



AMERICAN RED CROSS LIFEGUARD TRAINING



(Ages 15 and up)

Activity #: 113611-20

Class Dates: Friday, May 19 5 pm – 8:30 pm
Saturday, May 20 9 am – 5:30 pm
Sunday, May 14 9 am – 5:30 pm

FEE: \$285.00

Registration Deadline: May 12, 2023

Activity #: 113611-21

Class Dates: Friday, June 2 5 pm – 8:30 pm
Saturday, June 3 9 am – 5:30 pm
Sunday, June 4 9 am – 5:30 pm

FEE: \$285.00

Registration Deadline: May 26, 2023

Participants will complete the Pre-Requisite Swim Test on the first day of the course.

LOCATION: Loriella Park Swimming Pool, 10910 Leavells Road. Classroom located in the pool building, rear entrance.
Please bring a lunch (refrigerator and microwave on site), extra towels and be on time.

PREREQUISITES:

PLEASE BE CERTAIN THAT THE PARTICIPANT CAN COMPLETE THE SWIM TEST PRIOR TO REGISTERING FOR THE COURSE

- Students must be at least 15 years old by the last scheduled class date.
- Complete online course components PRIOR to the start of the first class.
- The prerequisite swim test will be completed on the first day of the course.
- Participants that attend the first day of class but fail to complete the prerequisite swim test will not be offered a refund under any circumstances.

The Prerequisite Swim Test consists of:

1. Swim 300 yards continuously using front crawl and breaststroke.
2. Swim 20 yds using crawl or breaststroke, surface dive to a depth of 7 to 10 feet, retrieve a 10-pound object, return to surface, and swim 20 yds back to the starting point with the object within 1 minute 40 seconds.
3. Tread water for 2 minutes without use of hands.

TRAINING CERTIFICATION REQUIREMENTS:

This class will provide participants with the knowledge, skills, and practice needed to become a well-trained, effective entry-level Lifeguard. In addition to learning preventive lifeguarding, facility safety, and professional behavior, participants will also practice rescue approaches, assists, tows, carries, and escapes. Includes the new AED training module.

Students MUST accomplish the following to become certified:

- Complete online course components PRIOR to the start of the first class.
- Complete classroom components by demonstrating competency in all required practical water and CPR/First Aid skills and activities.
- Correctly answer at least 80 percent of the questions on the final written exam.

REGISTRATION: Complete the attached form and return it with the fee, and a copy of the participant's birth certificate (if one is not already on file for all participants under the age of 18), to the Spotsylvania Parks and Recreation Department. *Make checks payable to "Treasurer, Spotsylvania County". There is a \$50 service charge on all returned checks.*

Register online at www.spotsylvania.va.us/parksandrec.

A Household Waiver needs to be completed and on file at the Parks and Recreation office prior to registering online.

2.75% NON-REFUNDABLE CONVENIENCE FEE CHARGED ON ALL CREDIT/DEBIT CARD TRANSACTIONS.

WITHDRAWALS: Those wishing to withdraw from the course must do so by contacting the Spotsylvania Parks and Recreation Department by the posted registration deadline. Individuals should follow up their verbal cancellation request with a **written refund request**. There will be a 20% administrative fee charged on all refunds. Failure to attend the class does not constitute a proper withdrawal, and the participant will not receive a refund.

WEATHER POSTPONEMENTS: Postponements due to inclement weather will be communicated by the Red Cross Instructor, as soon as a decision is made to postpone or cancel.



SPOTSYLVANIA PARKS AND RECREATION DEPARTMENT

P.O. BOX 28 ● SPOTSYLVANIA, VA 22553 ● 507-PLAY (7529) ● www.spotsylvania.va.us/parksandrec

AMERICAN RED CROSS LIFEGUARD TRAINING REGISTRATION FORM

Participant's Name _____ Boy _____ Girl _____
First MI Last

Complete Address _____

City _____ State _____ Zip _____

Participant's Email Address _____

NOTE: The email provided must be the participant's personal email address and not a parent's or guardian's

Primary Phone # _____ Secondary Phone # _____

Participant's Age _____ Participant's Birthdate _____

Birth Certificate is (circle one): On File Enclosed (A birth certificate must accompany this form if not already on file)

Medical Conditions, Injuries or Allergies: _____

Emergency Contact: _____ Phone: _____

Class/Activity Name: _____ Activity #: _____

Class/Activity Dates: _____ Fee \$ _____

(\$50 Fee On All Returned Checks) (2.75% Non-Refundable Convenience Fee Charged ON ALL Credit/Debit Card Transactions)

Select One	Lifeguard Training Course	Activity #	Fee
	May 19-21, 2023 *Participants will complete Pre-Requisite Swim Test on the first day of the course	113611-20	\$285
	June 2-4, 2023 *Participants will complete Pre-Requisite Swim Test on the first day of the course	113611-21	\$285

Release of Claims (Parent or Guardian must sign for participants under age 18): ***I, the undersigned, do agree to indemnify and hold harmless Spotsylvania County, and the officers, employees, and agents thereof, from any and all claims or liability, including attorney's fees and costs for any personal injury or other damage suffered as a result of participating in the American Red Cross Lifeguard Training Course. I understand that if I do not pass the tests, and do not receive American Red Cross Lifeguard certification, that I will not be refunded any amount of the registration fee.*** I understand that if I withdraw from the program, I must do so by contacting the Spotsylvania Parks and Recreation Department. I must follow up my verbal cancellation request with a written refund request. A 20% administrative fee will be charged on all refunds. I understand that if I withdraw from the program for any reason after the registration deadline, no refund will be available. Failure to attend a class/program does not constitute a proper withdrawal, and the participant will not receive a refund. I understand that if I withdraw from the program after participating in the prerequisite swim test on the first day of class, no refund will be available.

Signature (Parent or Guardian if participant under 18 years) _____ Date _____

Print Name _____

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