Safewater Management, Inc. American Red Cross

Lifeguard Class Registration 2024

Location: River Oaks pool

APPLICANT NAME			
ADDRESS			
PHONE NUMBER		EMAIL	
DATE OF BIRTH*			
*Applicant <u>must</u> provide proof of DC	B by providing	g a copy of their Drivers License or Birth Certificate.	
CHECK ALL THAT APPLY:			
First Class Dates: BLENDED	I FARNING	G	
Thursday, May 2 5:00pm – 5:00p	8.30nm	-	
Sunday, May 5 9:00am –	5:00pm		
Second Class Dates: BLENDE	D LEARNIN	NG	
Thursday, May 17 5:00pm -	8:30pm		
Friday, May 18 5:00pm –	8:30pm		
Saturday, May 19 9:00am –	5:00pm		
Sunday, May 20 9:00am –	5:00pm		
LIFEGUARD CLASS (\$3 CPR RECERTIFICATIO LIFEGUARD RECERTI ARC CPR CERTIFICAT	N (\$65.00) FICATION (
PLEASE MAKE CHECKS PAYABLE TO Safewater Management, Inc.			
Applicants do not write below this line.			
Total Amount Paid:			
Method of Payment: (Circle)	CASH	CHECK	
, (,		CHECK #	
Proof of Age Attached: (Circle)	YES	NO	
Payment Accepted By: (Name)	(Date)	