



American Red Cross Lifeguard Course Registration Form

COURSE FEE: The fee for this course is \$250 (3 YEAR-CERTIFICATION). This fee is non-refundable, unless you fail the swim test or are waitlisted and prohibited from enrolling.

CERTIFICATION: Students will pass the course and receive American Red Cross Certification in Lifeguarding, Standard First Aid, and CPR for the Professional Rescuer by successfully completing each module by American Red Cross standards. Certification Cards will be mailed to the address specified on this form.

American Red Cross Lifeguard Course Registration **Deliver to 401 N. Park St. or Fax to 817-573-5591**

Name: _____ **D.O.B.** _____

Address: _____ **City:** _____ **Zip:** _____

Phone Numbers: _____ (Home) _____ (Work) _____ (Cell)

E-mail: _____

Emergency Contact Person: _____

Phone Numbers: _____ (Home) _____ (Work) _____ (Cell)

Do You Have Any Medical Concerns/Athletic Injuries we should be aware of? Yes _____ No _____

(Please List): _____

Have you taken a lifeguarding course before? _____ NO _____ YES

Are you recertifying as a lifeguard? _____ NO _____ YES (CERTIFICATION EXPIRATION DATE _____)

I acknowledge that it is my responsibility to consult with a physician regarding any injury or condition that may affect my participation in this lifeguarding program. I agree not to hold the City of Granbury, its employees, or the instructors of this class liable for any injury or damages related to my use of the facilities, or participation in this or other related programs offered through the Granbury Parks & Recreation Department.

Signature of Participant: _____ **Date:** _____

Signature of Parent/Guardian if a Minor: _____

Print Name: _____ **Phone Number:** _____

GPRD Staff Only: Amount Due: _____ Amount Paid: _____ Date: _____ Receipt: _____ Staff: _____ RC: _____ Admin: _____ Inst: _____
