

Charles River Aquatics Application Form

Lifeguard Recertification Challenge Course: Sunday, April 25, from 10:45 AM - 6 PM

Please print clearly and fill out the application completely. If you have any questions, please call (617)-777-3556.

Personal Information

Name _____ Gender _____ Age _____ Date of Birth _____

Phone _____ Cell Phone _____

Address _____ e-mail _____

City _____ State _____ ZIP _____

Enrollment Limit: 12

Cost: \$150.

The purpose of this course is to help participants achieve recertification in Lifeguard Training without having to take the full course. This course will review equipment-based rescues, First Aid and CPR/AED for the Professional Rescuer. Successful completion of practical skills and written exam will renew certification in Lifeguard Training, CPR/AED for the Professional Rescuer and First Aid.

Participants must bring their own resuscitation mask and Lifeguarding textbook to class.

Current American Red Cross Lifeguard Training, CPR/AED for the Professional Rescuer and First Aid, or cards expired no more than one year before the start date of the class. At the beginning of the class, participants must successfully pass the written exams as well as swimming 300 yards before continuing. (Participant must swim 100 freestyle, 100 breaststroke, and 100 combo of both freestyle and breaststroke.)

A **refund minus a \$50 fee** will be given for failure to pass the swim test.

Release and Indemnification

Although we take care to guard the safety of you and your children while they are at the facilities of Charles River Aquatics, there are inherent risks associated with water and swimming pools, including but not limited to: slipping or falling on the pool deck, hitting the side or the bottom of the pool or ladders, and breathing in or swallowing water.

For and in consideration of the benefits to me from the use by me and/or my child(ren) of the facilities of Charles River Aquatics, Inc. and Boston University, and other good and valuable consideration, the undersigned, individually and for his/her heirs and personal representatives, hereby releases Charles River Aquatics, Inc. and Boston University directors, officers, agents, and employees from any and all claims of any kind or nature whatsoever, arising out of the use by me and/or my child(ren) of said facilities. The undersigned, individually and for his/her heirs and personal representatives, further agree to indemnify, defend and forever hold harmless Charles River Aquatics, Boston University and their directors, officers, agents, and employees from any and all liability or loss whatsoever, (including any cost of defending claims) arising out of our use of said facilities.

Date _____ Print Name _____ Signature _____

Send completed Application, and a check for **\$150** to:

Charles River Aquatics

PO Box 534

Needham Heights, MA 02494