

Lee's Summit R-7 Aquatic Center
Red Cross Lifeguard Certification Class

Complete and sign this form. Payment must be received with registration. Turn into the front desk at the Aquatic Center.

Fees: \$160.00 (non-employees of the Aquatic Center) \$70.00 (Employees of the Aquatic Center) Recertification: \$45.00

Age Requirements: Participants must be 15 years of age by the last date of the training session.

View session options on our website <https://aq.lsr7.org/about/jobs/lifeguard>

Participant Information

_____/_____/_____
Participant's Name D.O.B. Age

Email (_____)_____
Phone Number

Medical Information - List any medicine or additional information needed

Parent/Guardian Information

(unless participant is over 18 years old-please fill out for yourself)

Parent/Guardian Name

Street Address City State Zip

Email (_____)_____
Phone Number

Photo Release I give my permission for the Lee's Summit School District and/or Lee's Summit R-7 Aquatic Center to post the participants picture (without name) on the Internet or in a printed advertisement. Occasionally a group picture with the participant may be used, but participants will never be identified by name in group pictures.

Refund Policy By signing the registration form below, you have read and understood the following:
Absolutely NO MONETARY REFUNDS WILL BE ISSUED. We reserve the right to combine or cancel any class at any time. In the event that classes are cancelled by the R-7 Aquatic Center, we will make up the class. Prorated credits will only be issued under the following guidelines: Credits are only considered for students who have incurred the following: Major illnesses – Doctor's note required. Hospitalization – Doctor's note required. Prorated credits will not be granted for any other reason. This includes absences due to going away on holidays, exams or clashes with other activities. Prorated credits will only be considered for 3 or more consecutive absences from lessons. Prorated Credit – money will be credited to you to use for future R-7 Aquatic Center programs and will remain on your file for 12 months. Classes cancelled prior to one week before the first lesson will be granted a full credit. Classes cancelled within one week of the first lesson will be granted a 50% credit.

Permission & Liability Waiver This is to certify that I, parent or legal guardian of _____ (participant(s), hereby grant permission to the adult manager, coach and assistants of the Team to obtain medical care from any licensed physician, hospital, or medical clinic for the swimmer(s) named herein at such times as the parents or legal guardian cannot be reached in person or by telephone. This authorization shall include all league activities, including the period required from travel to and from the activities. We do hereby waive, release, absolve, indemnify, and agree to hold harmless the Lee's Summit School District, Lee's Summit R-7 Aquatic Center Team, its officers, managers coaches, supervisors, sponsors, participants, and persons participating in the league in those activities, from any and all claims, actions, causes of action or damages arising out of relating to any injury to the Swimmer(s).



Parent/Guardian OR Participant (if 18+) Signature

Date

Session participating in start date: _____
(View sessions on our website)

Staff Use Only Initials _____ Date of Payment _____

CK# _____ Cash CC# _____ Roster _____