

Lifeguard Course Registration Form

South St. Paul Parks and Recreation Department
100 - 7th Avenue North, South St. Paul, Minnesota 55075
Telephone: 651-366-6200 Website: southstpaul.org



The Lifeguard Blended Learning Course will be held at Central Square:

Friday, May 21 from 6-9 PM, Sat. & Sun. May 22, 23 from 9 AM - 4 PM.

All registration forms and payment MUST be received at our office by May 18, 2021 - no later!

(Preparation work will be required prior to the start of class.)

- Once your registration form is received by our office, you will receive a confirmation email with next steps and instructions.
- Cost of the course is \$175. Students employed with South St. Paul Parks & Recreation through the entire summer 2021 season will receive a \$100 reimbursement.

**SUBMIT
FORMS &
PAYMENT:**

By mail with payment by check to:

South St. Paul Parks & Recreation, 100 - 7th Avenue North, South St. Paul, MN 55075

In-person with payment by check, credit or debit card at our Parks & Rec. office at

Central Square Community Center, 100 - 7th Avenue North, South St. Paul, MN 55075

STUDENT INFORMATION

(please print clearly)

Name: _____

Date of Birth and Age: _____

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____

Home Phone: _____ Cell: _____

Emergency Contact Name and Phone Number: _____

Do you/student have any special needs or medical conditions we should know about: _____

Prerequisites: Minimum age: 15 years; Swim 300 yards continuously; Tread water for 2 minutes using only the legs; Complete a timed event within 1 minute, 40 seconds by starting in the water, swimming 20 yards, surface dive to a depth of 7 to 10 feet to retrieve a 10-pound object, return to the surface and swim 20 yards on the back to return to the starting point, exit the water without using steps or a ladder. Student must be able to perform these requirements.

Required Waiver: In consideration for being allowed to participate in the activity, Participant and/or parent, legal guardian or conservator hereby releases, indemnifies, defends and holds harmless the City and/or Special School District #6, it's officers, officials, employees, insurers, agents, contractors, representatives, associated personnel, successors and assigns, from and against all liabilities, claims, causes of action, demands, losses, damages, judgments and other obligations (including attorney's fees and costs), including those arising from any third party claims, on account of injury, loss or damage which arises out of, or are in any way related to, participation in the above described activity.

Notice: If Participant is under 18 years old or has a legal guardian or conservator, this release must be signed by the custodial parent, legal guardian or conservator. I certify that i am the custodial parent, legal guardian or conservator of the above named Participant. I hereby consent to his/her participation in the activity and any emergency medical treatment or services. I have read and understand the above terms and conditions and agree to be bound by them.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____