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FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

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# BUILDING AQUATIC LEADERS

## Lifeguard Certification

This Lifeguard Certification program is designed to prepare students to be rescue ready on the pool deck and in the water. The course will work on swimming endurance for rescues while learning about how to keep aquatic environments safe. This program will focus on:

- Enhancing safety skills needed to take action during an aquatic emergency
- Developing knowledge in various aquatic topics
- Increasing knowledge about the role of being a professional lifeguard
- Upon successful completion of this course the participants will have a certification for American Red Cross Lifeguarding, American Red Cross CPR and AED, American Red Cross First Aid, American Red Cross Emergency Oxygen, and YUSA Lifeguarding.

## Participant Qualification Requirements:

- Must be 16 by the last day of class
- Successfully pass the physical swimming requirements



### FOR MORE INFORMATION:

A.C. Lewis YMCA  
Americana YMCA  
Exxon-Mobil YMCA  
Stacey Adams  
225-924-3606

Dow Westside YMCA  
Williams & Lee Community Pool  
Jessica Huckaby  
225-687-1123

# American Red Cross Lifeguard Certification

Participants Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

DOB: \_\_\_\_\_ Home Phone Number \_\_\_\_\_

E-Mail (REQUIRED): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_

Price: \$200

A.C. Lewis YMCA	Dow Westside YMCA
<input type="checkbox"/> April 29-May 1 <input type="checkbox"/> TBD <input type="checkbox"/> Friday-Monday	<input type="checkbox"/> April 19 - April 22 (Spring Break) <input type="checkbox"/> 8:00am-12:00pm <input type="checkbox"/> Monday-Friday
<input type="checkbox"/> June 10-June 13 <input type="checkbox"/> TBD <input type="checkbox"/> Friday-Monday	<input type="checkbox"/> May 6 - May 9 <input type="checkbox"/> 4:00pm-9:00pm (Times vary per day) <input type="checkbox"/> Friday-Monday
	<input type="checkbox"/> May 20 - May 23 <input type="checkbox"/> 4:00pm-9:00pm (Times vary per day) <input type="checkbox"/> Friday-Monday
	<input type="checkbox"/> May 31 - June 4 <input type="checkbox"/> 9:00am-6:00pm <input type="checkbox"/> Tuesday-Saturday

There is no refund for this program if failure to attend or complete the class. I understand that this course requires e-learning to be completed before the first class day. If pre-course work is not completed and given to instructor before start of course, I will not be able to complete the course and no refund will be given.

The YMCA of the Capital Area does not provide accident or medical insurance for program participants. I recognize that participation in YMCA sponsored activities may expose myself or my child to risk of injury. I agree to hold the YMCA harmless from any claims, which may occur through participation in any activity at the YMCA or in its programs. In cases of emergency or accident to myself and/or to my child and I am unable to respond or be contacted, I hereby grant the YMCA director or his/her agent to secure proper medical treatment and transportation for myself and/or my child to an appropriate facility for treatment. As a YMCA participant, I authorize the YMCA to use any images taken of myself and/or my child for promotional purposes of the YMCA. I have read and understand the above information and therefore grant myself and/or my child permission to participate in this YMCA Program in accordance with the conditions set forth above.

Coronavirus, COVID-19, is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a mean to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in YMCA of the Capital Area programs or accessing YMCA of the Capital Area facilities could increase the risk of contracting COVID-19. YMCA of the Capital Area in no way warrants that COVID-19 infection will not occur through participation in YMCA of the Capital Area programs or accessing YMCA of the Capital Area facilities.

I have read and understand the above information and therefore grant myself and/or my child permission to participate in this YMCA Program in accordance with the conditions set forth above.

Signature of Participant/Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_