



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# LIFEGUARD RECERTIFICATION CLASSES

**Need to renew your lifeguard certification?  
Come to the Rockland County YMCA**

Only valid for currently certified lifeguards- please attach a copy of your current certification

The course incorporates a blended learning format with online training sessions, classroom skills and water rescue activities.

**Lifeguard Recertification Prerequisites:**

Lifeguard Recertification participants must provide proof of valid Lifeguarding, First Aid and CPR/AED for the Professional Rescuer certifications and pass the prerequisite skills for lifeguarding.

**In order to take this class you must be able to pass the lifeguard prerequisite skills:**

**Swim 300 yards continuously:**

Candidates must swim using the front crawl and breaststroke.

**Tread water for 2 minutes:**

Only using legs-- arms not allowed.

**Complete a timed event within 1 minute, 40 seconds:**

Swim the length of the pool, surface dive to the bottom of the pool and retrieve a 10-pound brick. With the brick, swim back on your back to the starting point with both hands holding the brick and keeping the face at or near the surface. Exit the water without using a ladder or steps.

**2020- Class schedule**

March 14th 9:00am - 6:00pm  
April 25th 9:00am - 6:00pm  
May 16th 9:00am - 6:00pm

October 24th 9:00am - 6:00pm  
December 12th 9:00am - 6:00pm

**Cost: \$250**



**For more information contact:**

James Mullen, Aquatics Director E :JMullen@rocklandymca.org

Lisa Tkach, Assistant Aquatics Director E: LTkach@rocklandymca.org

# American Red Cross Lifeguard - RECERTIFICATION REGISTRATION FORM

## CANIDATES FOR THIS CLASS MUST

Lifeguard Recertification participants must provide proof of valid Lifeguarding, First Aid and CPR/AED for the Professional Rescuer certifications and pass the prerequisite skills for lifeguarding.

## PREREQUISITE SKILLS:

### Swim 300 yards continuously:

Candidates must swim using the front crawl and breaststroke.

### Tread water for 2 minutes:

Only using legs-- arms not allowed.

### Complete a timed event within 1 minute, 40 seconds:

Swim the length of the pool, surface dive to the bottom of the pool and retrieve a 10-pound brick. With the brick, swim back to the starting point on your back with both hands holding the brick and keeping the face at or near the surface. Exit the water without using a ladder or steps.

On the first day of the course, everyone will be tested in the standard listed above order to continue in the course. The course fee will not be refunded if the participant fails to pass the prerequisite test. Please contact the Aquatic department with concerns BEFORE you register.

**Date of Class:** \_\_\_\_\_ **Date of Expiration:** \_\_\_\_\_

## Student Information:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Student's Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Student's Email Address: \_\_\_\_\_

## PERMISSIONS -please initial

\_\_\_ Yes, I have read the perquisites and understand that there will be no refunds if I fail the prerequisites/the course.

\_\_\_ Yes, I understand I MUST complete the online ARC blended learning prior to class.

\_\_\_ Yes, I agree that in the event I, or my emergency contacts, am not able to communicate or cannot be reached in an emergency, I hereby give permission to the medical personnel selected by the YMCA to properly treat the participant. I will be fully responsible for any costs of such treatment, even if not covered by insurance.

\_\_\_ Yes, I agree that the named participant is physically sound, having medical approval to participate in the activities of the YMCA. This information is correct as far as I know, and the person here in described has permission to engage in all prescribed program activities except as noted.

\_\_\_ Yes, I agree that in consideration of the named participant's participation in the activities of the Rockland County YMCA, I hereby agree to hold free from any and all liability the YMCA and its respective officers, employees and members. I do hereby for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages which I may have or which may hereinafter accrue to me arising out of or connected with the named participant's participation in any of the activities of the YMCA. I have read and will abide by the above stated policies and understand there are no makeups or credits

(Optional) \_\_\_ Yes, I give permission for the Y to use my (my child's) photograph for public relations and/or marketing purposes.

Participant signature/Parent/Guardian (if under 18): \_\_\_\_\_