

General Class Information:

Schedule for New Lifeguards:

January 7: 8am-3pm
January 8: 8am-3pm
January 9: 8am-2pm

Schedule for Re-Certifying Lifeguards:

January 7: 8am-2pm
January 8: 8am-12pm
January 9: 8am-12pm

Schedule for students needing CPR only

January 8, 8am-1pm

Pre-requisites:

- 300 yard continuous swim
- timed brick retrieval
- tread 2 min. with no hands
- current lifeguard certification
(for re-certification students only)

Age:

Minimum 15 years old by last scheduled class

Fee:

- \$450 Lifeguard Training
- \$330 Lifeguard Re-certification
- \$250 Lifeguard Re-certification if you have certified with us.
- \$140 CPRO with AED

Required:



Also Offered through Westchester & Fairfield:

CPR & AED Training



Swim Camp
(ages K thru 14)

RTE
(responding to emergencies)



Water Safety Instructor
(must be 16 by last day of class)

www.westfairswim.com

**Return To:
Westchester & Fairfield
Swimming and Lifeguarding
P.O. Box 34
Pleasantville, NY 10570**

American Red Cross
Lifeguard Training,
LG Re-certification or
CPR only
2020 Schedule



Westchester & Fairfield

Swimming and Lifeguarding

**Includes First Aid, CPR & AED
for the Professional Rescuer**

**also available....
CPR Re-Certification
Lifeguard Re-certification
RTE (Responding to Emergencies)
Waterfront Certification
Water Safety Instructor**

Location: Scuba New York
2037 Central Park Avenue, Yonkers, New
York 10710

(Other locations and dates available!)

Katherine Palladino
Phone: (914) 588-2971
www.westfairswim.com

Lifeguard Training Including CPR/AED and First Aid

LIFEGUARD TRAINING

January 7, Tuesday, 8am-3pm
January 8, Wednesday, 8am-3pm
January 9, Thursday, 8am-2pm

LIFEGUARD TRAINING RECERTIFICATION

(Must hold current LG certification.)

January 7, Tuesday, 8am-2pm
January 8, Wednesday, 8am-2pm
January 9, Thursday, 8am-noon

CPR FOR PROFESSIONAL RESCUER

January 8, Wednesday, 8am-1pm



Registration and payment must be received prior to the first day of class to ensure availability.

Registration Form

Name: _____

Address: _____

City: _____ ST _____ Zip _____

Sex: _____ DOB _____ Age _____

Copy of proof of age must be attached.

Parent / Guardian Name (s): _____

Phone Day: _____

Phone Evening: _____

Cell Phone (other): _____

*Legible Email: _____

Doctor's Name: _____

Phone: _____

To best serve your child, are there any special learning or behavioral needs? Y or N

Name of Insurance Carrier: _____

Illnesses, Allergies, Medications, Etc: _____

Consent to Treat: _____

Emergency contact: _____

(if parents cannot be reached)

Name: _____

Phone: _____

Relationship: _____

How did you hear about us? _____

-3 Ways To Register-

Online using credit card: westfairswim.com

Mail in check payable to:

Westfair Swimming and Lifeguarding
Add \$15 to class fee if you would like to purchase CPR pocket mask through us.

Check # _____ Total _____

Credit Card # _____

Type: MC Visa Code _____ Exp _____

(note: \$9 admin. fee payment by credit card)

Signature: _____

Westchester and Fairfield Swimming & Lifeguard (WFS&L) Release

I, _____ (print parent's name or student if over 18) hereby acknowledge that any training or demonstration or participation program may involve certain risks to any participant including, without limitation injury to person or to personal property. I fully understand these risks and voluntarily wish to have, _____ (name) participate in the WFS&L class at Scuba New York on _____ (print dates). I fully understand and hereby acknowledge that the class is not conducted, supervised, or endorsed by Scuba New York, and that WFS&L is not in any way a partner or joint venturer of, or otherwise connected to or controlled by Scuba New York. In consideration of _____ (name) being permitted to participate in class, I hereby agree to assume all the risks and responsibilities surrounding such participation undertaken as an adjunct thereto, including, without limitation, those of injury to person or personal property; and further, for myself, my heirs, personal representatives, and assignees. I hereby agree to defend, hold harmless, indemnify, release forever, and forever discharge WFS& L, Scuba New York and all their trustees, officers, agents, and employees from and against any and all threatened and imposed claims, demands, and actions or causes of action, on account of damage to personal property, or personal injury which may result from the aforesaid participation and activities incident thereto. Further, it is hereby certified that the above-named participant has no medical or psychological conditions which would preclude such participation. I hereby authorize Scuba New York through its authorized agents to secure for _____ (name) any emergency medical treatment that becomes or that may become necessary as a result of participation in class. I acknowledge I have read and understand. Signature of parent or guardian or student if over 18 & Date _____