

2022 Bethlehem Town Pool Red Cross Junior Lifeguarding Course

Training session:

July 5 – Aug 4, 2021
M, T, W, 2:00 - 5:30 pm

Apprenticeship:

Aug 5 - Aug 29, 2021
Hours will be individualized

\$150 Ages: 12-15 years of age or entering 6th grade.
(Scholarships maybe available, financial need required)

The Red Cross Junior Lifeguarding Course has a strong focus on developing skills to help participants meet the Lifeguarding course prerequisite, in addition to gaining experience for incoming guards to feel competent, capable, and confident as a newly certified Jr. Lifeguard.

The course also introduces participants to lifesaving skills, such as in-water rescues, use of a rescue tube, first aid, CPR, and AED training, and numerous other tasks Lifeguards may encounter on a day to day basis. Participants have an opportunity to shadow lifeguards in a rotation to get a real sense of being on the job.

Upon successful completion of course, skills, and test, participants will receive Red Cross Junior Lifeguarding Certifications and American Heart Association First Aid & CPR/ AED certifications.

Bethlehem Town Pool Jr. Lifeguard program allows teens the opportunity to transition into a Paying summer job as a Jr. Lifeguard after completion of a 50 hour apprenticeship. BTP pays ½ of Red Level Jr. Guard's fee to become a lifeguard when they turn 15 years of age.

To bring daily to pool:

Swim suit, goggle, and several towels
Sunglasses, sunscreen, and warm clothes into
Water bottles, food, snacks
Necessary materials for class

Pre-course requirements:

All participants must be able to perform various skills in order to participate in this class.

The following skills will be tested on the first day of class:

- Swim the front crawl for 25 yards continuously while breathing to the front or side.
- Swim the breaststroke for 25 yards continuously while using a pull, breathe, kick and glide sequence.
- Swim underwater for 10 feet
- Complete the Water Competency Sequence
 1. Step into the water from the side and totally submerge.
 2. Maintain position for one minute by treading water
 3. Rotate one full turn and oriented to the exit.
 4. Level off and swim on the front or back 25 yards.
 5. Exit without using a ladder or steps.

2022 Red Cross Teen Program Participant Information

PARTICIPANTS NAME _____

GRADE COMPLETED _____ DATE OF BIRTH _____ AGE _____ MALE _____ FEMALE _____

ADDRESS _____

LEARNING STYLE and concerns instructor should be aware of:

ANY MEDICAL CONDITIONS WE SHOULD BE AWARE OF? Allergies? Asthma? Seizures? Diabetes? Other?

PARTICIPANT IS A: _____ Swim Teacher aide
Training session: \$50
June 28 - July 15
M, T, W, TH 10:30 am- 2:00 pm

_____ Junior Lifeguard
Training session: \$150
July 5 - Aug 4
M, T, W, 2-5 PM, Thursday TBA

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN NAME: _____ RELATIONSHIP _____
PHONE _____ EMAIL _____

PARENT/GUARDIAN NAME: _____ RELATIONSHIP _____
PHONE _____ EMAIL _____

EMERGENCY CONTACT INFORMATION (Contact person other than a parent, who can be reached.)

NAME: _____ RELATIONSHIP _____ PHONE _____

RELEASE CAUSE

I, the undersigned, as the parent or legal guardian of the child listed on this application agree and understand that swimming is a hazardous activity. I recognize that there are risks inherent in the sport of swimming, including but not limited; to paralyzing injuries and death.

The undersigned hereby releases and holds harmless the Town of Bethlehem, it's Council and any officers, employees or agents thereof from any and all claims, liabilities or demands whatsoever arising or claimed to have arisen out of the enrollment or participation in any program by the participant herein. The Bethlehem Town Pool assumes no responsibility for any personal property placed in or about the facility.

The parent/guardian authorizes any representative of the Bethlehem Public Pool to have the participant treated in any medical emergency during their participation in the Bethlehem Town Pool swim lessons or programs. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

I also understand that photos are occasionally taken at the Bethlehem Town Pool and that any photo taken of my child may be used for publicity purposes.

If you do not wish for the Bethlehem Town Pool to use photos of your child for publicity purposes, please initial here _____.

I have read and understood, and I agree with the Release Cause outlined above.

X _____
SIGNATURE OF RESPONSIBLE PARTY RELATIONSHIP DATE

-----FOR OFFICE USE ONLY-----

PERSON PAYING: _____

PHONE: _____
(IF PERSON IS DIFFERENT THAN THE CONTACT PERSONS)

PAYMENT TYPE CHECK # _____

CASH

TOTAL AMOUNT _____

AUTHORIZED BY _____