

Dear Lifeguarding Course Participant:

Thank you for enrolling in the American Red Cross Lifeguarding course. The dates and location of the training are listed below:

Date(s): Pre-course swim test: Saturday December 22, 2018 7:00-8:30 am  
Full class: Thursday December 27, 2018 through January 4, 2019 Time(s): see attached schedule

Place: Columbia Basin Racquet Club, 1776 Terminal Drive, Richland, WA 99354

The purpose of the American Red Cross Lifeguarding course is to provide entry-level lifeguard participants with the knowledge and skills to prevent recognize and respond to aquatic emergencies and to provide care for breathing and cardiac emergencies, injuries and sudden illnesses until emergency medical services personnel take over.

To enroll in the Lifeguarding course, you must be at least 15 years old before the last scheduled class session. To participate in the course, you must be able to pass a prerequisite skill evaluation that includes the following:

1. Swim 300 yards continuously demonstrating breath control and rhythmic breathing. You may swim using the front crawl, breaststroke or a combination of both but swimming on the back or side is not allowed.  
**Swim goggles may be used for the 300 yard swim only.**
2. Tread water for 2 minutes using only the legs. Hands should be placed under your armpits.
3. Complete a timed event within 1 minute, 40 seconds. **Swim goggles are not allowed.**
  - Starting in the water, swim 20 yards. Your face may be in or out of the water.
  - Surface dive, feet-first or head-first, to a depth of 7 to 10 feet to retrieve a 10-pound object.
  - Return to the surface and swim 20 yards on your back to return to the starting point with both hands holding the object while keeping your face at or near the surface so you are able to get a breath. You should not swim the distance under water. Exit the water without using a ladder or steps.  
(*time ends once out of the water*)

The prerequisite skills evaluation will occur on the Saturday before the first day of the course. Once you have passed the prerequisite swim test, and attend the first class NO REFUNDS will be given, unless for a medical emergency. Please bring a swimsuit and towel for the skills evaluation and for every class.

To successfully complete the course, you must attend the entire course, participate in all skill sessions/drills, Activities, and scenarios, demonstrate competency in all required skills and scenarios, and pass the final written exams with a minimum grade of 80 percent.

The practice sessions will require some strenuous physical activity. You are encouraged to check with your health care professional before participating in the practice sessions. If a medical condition or disability exists that might prevent participation in the activities, or there are questions about fully participating in the Lifeguarding course, please contact me to discuss this before the course begins.

Upon successful completion of the course, you will receive an American Red Cross certificate for Lifeguarding/ First Aid/CPR/AED, valid for 2 years.

**If you have questions, please contact Nicole Strasser at (509) 943 - 8416.**

Sincerely,  
Nicole Strasser

# Lifeguard Training

## December 22, 2018 – January 4, 2019

**Dates and Assignments:**

**Saturday, December 22<sup>nd</sup>**

|   |              |  |
|---|--------------|--|
| Reading assignment<br>Chapters 1,2, and 3 | 7:00-8:30 am | Prerequisite swim test & reading assignments.<br>*PLEASE BRING PROOF OF AGE THIS DAY (Driver's License, learner's permit, birth certificate, etc.) |
|---|--------------|--|

**Thursday, December 27<sup>th</sup>**

|  |   |   |
|--|---|---|
| Reading assignment<br>Chapters 4, 5, and 6 | 7:00-10:15 am<br>10:30-12:30pm<br>12:30-1:00pm<br>1:00-3:00pm | Class room time<br>In-water session (Outdoor pool)<br>Lunch<br>Classroom Time |
|--|---|---|

**Friday, December 28<sup>th</sup>**

|   |  |   |
|---|--|---|
| Reading Assignment<br>Chapters 7,8,9 and 10 | 7:00 - 9:15 am<br>9:30 - 12:00 pm<br>12:00 – 12:30 pm<br>12:30 – 3:00 pm | Class room time<br>In-water session (Outdoor pool)<br>Lunch<br>Classroom Time |
|---|--|---|

**Saturday, December 29<sup>th</sup>**

|                                  |   |  |
|----------------------------------|---|--|
| Reading assignment<br>Chapter 11 | 7:00 am -12:00 pm<br>12:00 – 12:30 pm<br>12:30- 3:00 pm | In-water session (Outdoor pool)<br>Lunch time<br>Class room time |
|----------------------------------|---|--|

**Wednesday, January 2<sup>nd</sup>**

|   |  |
|---|--|
| 7:00-10:15 am<br>10:30am-12:00 pm<br>12:00-12:30 pm<br>12:45- 3:00 pm | Class room time<br>In-water session (outdoor pool)<br>Lunch<br>In-water session (outdoor pool) |
|---|--|

**Thursday, January 3<sup>rd</sup>**

|               |                               |
|---------------|-------------------------------|
| 7:00- 1:00 pm | Written review and water test |
|---------------|-------------------------------|

**Friday, January 4<sup>th</sup>**

|             |                     |
|-------------|---------------------|
| 7:00-1:00pm | Extra Day if needed |
|-------------|---------------------|

**Things you will need for class every day:**

**Lifeguard Book & CPR mask  
Swimsuit and extra clothes. Lunch or money to buy lunch  
and your willingness to learn!**

| <b>Cost:</b>    | <b><u>Member</u></b> | <b><u>Non Member</u></b> |
|-----------------|----------------------|--------------------------|
| Course Fee      | \$199.00             | \$221.00                 |
| Red Cross cards | \$ 36.00             | \$ 36.00                 |

*Sales tax will be added at time of registration.*

Participants must order their own current version of the Lifeguard Training Manual & an Adult CPR training mask prior to the first day of class from [redcrossstore.org](http://redcrossstore.org). Price does not included tax or shipping.

A CPR Training Pocket Mask may be purchased from the [redcrossstore.org](http://redcrossstore.org) or other online sources.

Lifeguard Manual: \$34.99

CPR Pocket Mask





1776 Terminal Drive  
Richland, WA 99354

PARENT / GUARDIAN PERMISSION  
and  
WAIVER AND RELEASE

Activity participating in: Lifeguard Training

Course Training Dates: 12/22/18- 1/4/19

Activity Location: 1776 Terminal Drive, Richland, WA 99354

Participant: \_\_\_\_\_  
Name Street State Zip

Date of Birth: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_  
Name Street State Zip

Parent Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Other Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name and Relationship

Allergies: \_\_\_\_\_ none or explain \_\_\_\_\_

Medications: \_\_\_\_\_ none or explain \_\_\_\_\_

Chronic condition: \_\_\_\_\_ none or explain \_\_\_\_\_

Physical condition(s) that may limit activity: \_\_\_\_\_ none or explain \_\_\_\_\_

Columbia Basin Racquet Club makes no recommendation as to the above-named participant's fitness for the above-named activity. It is understood that the above-named participant and/or parent or guardian will be solely responsible for undertaking such activities and any/all health risks associated with such activities.

I hereby give permission for my child to participate in the activity listed above at the location listed above. I authorize Columbia Basin Racquet Club and its respective agent(s) and/or representative(s) supervising the above-named activity to administer emergency treatment to the above-named participant for any accident or illness. I authorize approval of necessary medical care by Columbia Basin Racquet Club's agent(s) and/or representative(s) as well any qualified licensed medical professional.

By signing this agreement, I hereby, for myself, my heirs, my executors, and administrators fully and forever waive and release any and all claims for damages I may have against Columbia Basin Racquet Club and their respective agents, representatives, successors and assignees for any and all injuries which may be suffered in connection with my participation in this activity.

\_\_\_\_\_  
Name of Parent or Guardian Signature Date

\_\_\_\_\_  
Name of Student Signature Date

Winter 2018 Lifeguard Training Registration – Payment must accompany registration.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Parent Name: \_\_\_\_\_

Member # \_\_\_\_\_ Non: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Level: \_\_\_\_\_ Class Day \_\_\_\_\_ Class Time: \_\_\_\_\_ Session: \_\_\_\_\_

Payment: Check \_\_\_\_\_ Cash \_\_\_\_\_ Credit \_\_\_\_\_ Charge \_\_\_\_\_ Total \_\_\_\_\_

LGT Class Dates: 12/22 – 1/4