

Learn

TO SAVE. CERTIFY NOW.



Little Rock
Athletic Club

4610 Sam Peck Road | LITTLE ROCK, AR 72223
501.225.3600 | WWW.LRAC.COM

play on

PARTICIPANT INFORMATION

Name: _____ Date of birth: _____ Gender: Male Female
____ LRAC member ____ LRRC member ____ NLRAC member ____ DAC member ____ Non-member

Mother's name: _____ Father's name: _____
Street address: _____ City: _____ State: _____ Zip: _____
Mother's phone: _____ Father's phone: _____
Email: _____

MEDICAL INFORMATION

Allergies, medications, special conditions including but not limited to asthma, diabetes, sun sensitivity, seizures or fainting spells (please provide specifics): _____

Person to contact in case of emergency if parents cannot be reached: _____
Phone(s): _____ Relationship to child: _____
Doctor's name: _____ Phone number: _____
Emergency room of choice: _____

FEE INFORMATION

Lifeguard Certification

The total fee is \$300 per person, \$35 of which is payable to the Red Cross for the online portion of the class.
A \$100 non-refundable deposit is due with your registration.

Lifeguard Re-certification

\$162 per person payable to the LRAC.
A \$100 non-refundable deposit is due with your registration.

PAYMENT INFORMATION

Person responsible for payment: _____
Responsible party's address: _____ City: _____ State: _____ Zip: _____
Day phone: _____ Evening phone: _____ Email address: _____

Method of Payment (Indicate your choice by completing the appropriate information below):
For security reasons, your payment information will be encrypted by our computer software and this information will be shredded.

LRAC/LRRC/NLRAC club account option (for members only/account must be current)

Name of member to be charged: _____

Credit/Debit card option (Visa, MasterCard, Discover, American Express)

Name as shown on card: _____

Credit card number: _____ Expiration date: _____ CCV number: _____

Now review the *Course Information*, select your  date and sign the waiver on the back.

COURSE INFORMATION

The Lifeguard Certification is a blended learning experience. As such, it combines online learning with on-site sessions where you will practice skills and demonstrate competency. Please understand due to the serious nature of this class, there will be no exceptions on either age (you must be 15 years old) or class attendance (none may be missed). Participants will be required to pass a 300 yard swim test (demonstrating a minimum of 100 yards freestyle and 100 yards breast stroke) and a timed retrieval test.

ONLINE PORTION

After we have processed your registration, we will email you a link for the online portion. Please plan to complete all online lessons of your training at least two days prior to your on-site skills session. Once you complete the online course, you must print the completion report from the Main Menu page of the online course. You are required to bring your completion report to the on-site skills session in order to verify completion of the online course.

The online course syllabus for both the certification and re-certification is as follows:

Online Lesson	Material Covered
Introduction Lesson 1: The Professional Lifeguard Lesson 2: Facility Safety and Patron Surveillance Lesson 3: Injury Prevention	Chapters 1 - 3; Introduction and Lessons 1 - 3
Lesson 4: Water Rescue Skills	Chapters 5 and 6; Lesson 4
Lesson 5: Before Providing Care and Victim Assessment Lesson 6: Breathing Emergencies	Chapters 7 and 8; Lessons 5 and 6
Lesson 7: Cardiac Emergencies and Using an Automated External Defibrillator	Chapter 9; Lesson 7
Lesson 8: First Aid Lesson 9: Head, Neck and Spinal Injuries in the Water	Chapters 10 and 11; Lessons 8 and 9
Lesson 10: Final Written Exam and confirmation of participant's completion of online CPR/AED for the Professional Rescuer and First Aid exam	CPR/AED for the Professional Rescuer and First Aid

COURSE SELECTION

Select one of the following for on-site skills training.

Lifeguard Certification Sessions

- January 31 - February 2
- February 28 - March 2
- March 28 - 30
- April 25 - 27
- May 9 - 11
- May 16 - 18

Class Times and Locations

Thursday: 4:30 - 9:30 pm (LRAC)

Friday: 4:30 - 9:30 pm (LRAC)

Saturday: 8:00 am - 1:00 pm (LRRC*)

*Little Rock Racquet Club

1 Huntington Road, Little Rock, AR 72227

Lifeguard Re-certification Sessions

- Sunday, January 6
- Tuesday, May 28
- Thursday, May 30

Class Time and Location

8:00 am - 5:00 pm (LRRC)

WAIVER

Release of Liability and Assumption of Risk Agreement - The facilities and activity programs offered under the auspices of the Little Rock Athletic Centers, LLC (LRAC), dba Little Rock Athletic Club, Little Rock Racquet Club, North Little Rock Athletic Club and Downtown Athletic Club, have been designed and established to provide the optimum level of beneficial exercise and enjoyment without compromising the health or safety of the members or guests who utilize the facilities or participate in its on or off-site activities. Because of the nature of these programs and of the equipment utilized, there is an inherent risk of injury. Therefore, any exercise activity places a practical limitation on the ability of LRAC to prevent injuries to participants regardless of the activities of the participant while taking advantage of the opportunities at LRAC. The undersigned acknowledges the individual responsibility to minimize risk by thoughtful and cautious use of the programs, equipment and the facilities of LRAC.

Therefore, in consideration of being allowed to participate in LRAC programs and to utilize equipment and facilities at LRAC, I the undersigned, acknowledge and agree that:

- The risk of injury from the activities involved in LRAC programs, equipment and facilities is significant, including the potential for permanent paralysis and death.
- I knowingly and freely assume all such risks, both known and unknown and assume full responsibility for my participation.
- I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest LRAC representative immediately.
- I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, indemnify, and hold harmless LRAC, its members, managers, officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (releasees), from any and all claims, demands, losses, and liability arising out of or related to any injury, disability or death I may suffer, or loss or damage to person or property, to the fullest extent permitted by law.

Permission to Use Photography and/or Video - I grant to LRAC and all its subsidiaries the right to take photographs and/or videos of my child. I authorize LRAC, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that LRAC may edit and use such photographs and/or videos for any lawful purpose including, for example, such purposes as publicity, illustration, advertising and web content.

MY SIGNATURE CONVEYS

- I authorize the LRAC to draft my program fee;
- I give my consent for my child to receive medical or surgical aid as may be deemed necessary and expedient by a duly licensed or recognized physician or surgeon in the case of an emergency when a parent or guardian cannot be reached. Consent is also given for an LRAC employee or his/her duly appointed representative to transport my child for emergency medical treatment in said situation;
- I have read the Release of Liability and Assumption of Risk Agreement above; fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement;
- I give my permission for the club to contact me via email with club news and programming information;
- I have read the Permission to Use Photography and/or Video Agreement above and give consent for my child to be in video or photographed; and
- This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, to the fullest extent permitted by law.

Participant's Name: _____

Parent's/Guardian's Signature: _____ Date: _____