



**South Bethany Beach Patrol 2016
Junior Lifeguard Program
Ages 9 Years - 15 Years
(Class Size Limited to 15 Children per Session)**

Child's Name - One Child per Application (Print): _____

Age: _____ Date of Birth: _____ Male Female

Please circle your child's shirt size: **SMALL** **MEDIUM** **LARGE** **EXTRA LARGE** **ADULT SMALL**

All Sessions 10:30am - 11:30am @ South 2nd Street Lifeguard Shack

-All sessions are subject to cancellation due to inclement weather. Please note that there are no refunds.

Sessions:

Session 1	July 7	<input type="checkbox"/>
Session 2	July 12, 14	<input type="checkbox"/>
Session 3	July 19, 21	<input type="checkbox"/>
Session 4	July 26, 28	<input type="checkbox"/>
Session 5	Aug 2, 4	<input type="checkbox"/>
Session 6	Aug 9, 11	<input type="checkbox"/>
Session 7	Aug 16, 18	<input type="checkbox"/>
Session 8	Aug 23, 25	<input type="checkbox"/>

Please check all sessions your child will be attending.

Sessions are Tuesday / Thursday

All participants must have prior swimming lessons or possess adequate swimming skills. **PRIOR SWIMMING EXPERIENCE:** _____

Parent Name (Print): _____

Phone: Local _____ Out of Town _____

Address: Local _____ Home _____

Emergency Contact Name and Phone: _____

Secondary Emergency Contact Name and Phone: _____

Does your child have any physical or mental disabilities that would prevent him/her from participating in this program? **No** **Yes**

If YES, please explain _____

By signing this registration form, I hereby release the South Bethany Beach Patrol, the Town of South Bethany, and its designees from any and all liability from my child participating in this program (at least one Parent or Guardian signature required)

Parent/Guardian Signature _____

Parent/Guardian Signature _____

FEE: DAILY \$8 Check Enclosed Paid in person

WEEKLY SESSION \$15 Check Enclosed Paid in person

SUMMER MEMBERSHIP \$100 (includes free t-shirt)

Received By: _____ Date Received: _____ Session Assigned: _____

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