



Reading Recreation Commission
320 South 3rd Street
Reading Pa 19602
610-655-6067
matthew.lubas@readingpa.gov

Lifeguard Certification/Recertification 2018

Name: _____

Mailing address: _____
Street City Zip

Phone #: _____ Email: _____ DOB: _____

Emergency Contact Name: _____ Emergency Phone#: _____

Does the participant have any special needs/health issues (included allergies): _____

Mark with (X) the class the class you are registering for:

_____ Lifeguard Certification

_____ Lifeguard/CPR/First Aid/AED Recertification

Waiver of Liability

The undersigned in consideration of admittance to this activity does hereby for myself, my minor child, all heirs, successors, and assigns agree to release, waive, and forever discharge from all liabilities and further agree to indemnity, save and hold harmless the Reading Recreation Commission agents and employees from any loss, liability, damage, or costs which may be incurred due to participation in this activity.

Parent/Guardian Name (Please Print) _____

Parent/Guardian Signature _____ Date: _____

DO NOT WRITE BELOW THIS LINE

FOR OFFICE USE ONLY:

Lifeguard @ \$190.00

Recertification @ \$135.00

Paid Cash or Check (ck#: _____) Received By: _____ Date: _____