

American Red Cross Lifeguard Recertification Registration

Name _____

Phone# _____

Address _____

Date of

Birth _____

City/State _____

Date of current certification
expiration date _____

Email _____

American Red Cross Lifeguard Recertification

Must have a current certification

May 23, 2025

8am-6pm

Course fee: \$180

Registration deadline for all courses is May 1, 2025

Checks can be made to

The Aerobic Center

526 New Alexandria Road

Greensburg, PA 15601

There will be a \$20.00 processing fee on all refunds.

All cancellations must be made before the first class.

You must attend all classes, actively participate, score a minimum of 80% on both water and written tests.

I fully understand that the lifeguard certification requires physical activity, and hereby represent and acknowledge that my physical condition permits me to participate in the Lifeguard Review course. I also release and discharge The Aerobic Center, its instructors, lifeguards, supervisors, and directors from any and all claims, damages, demands and liabilities arising out of or any way related to participation in the lifeguard certification.

Signature _____

Date _____

Parent's Signature (if under 18) _____

Office use:

Receipt# _____ Date paid _____

**The
Aerobic
Center**
Lynch Field ★ Greensburg, PA