



RECERTIFICATION COURSE

American
Red Cross

Dr. Lorraine Wray Aquatic Center
Howard T. Ennis School
20346 Ennis Road
Georgetown, DE 19947

Red Cross Lifeguard Recertification Classes 2021

- Your certification must be in good standing in order to qualify for this class. Please submit a copy of your certification with your registration.
- If your certification has expired, you will need to take the full lifeguard training course.
- Please bring your pocket mask and manual that were provided to you from your original Lifeguard Certification class. If needed, pocket masks can be purchased for \$10 and manuals for \$15.

Location: *Dr. Lorraine Wray Aquatic Center*

Lifeguard Recertification Training Dates:

March 28, 2021

9:00 am – 7:00 pm

Or

April 11, 2021

9:00 am – 7:00 pm

Cost: \$175.00

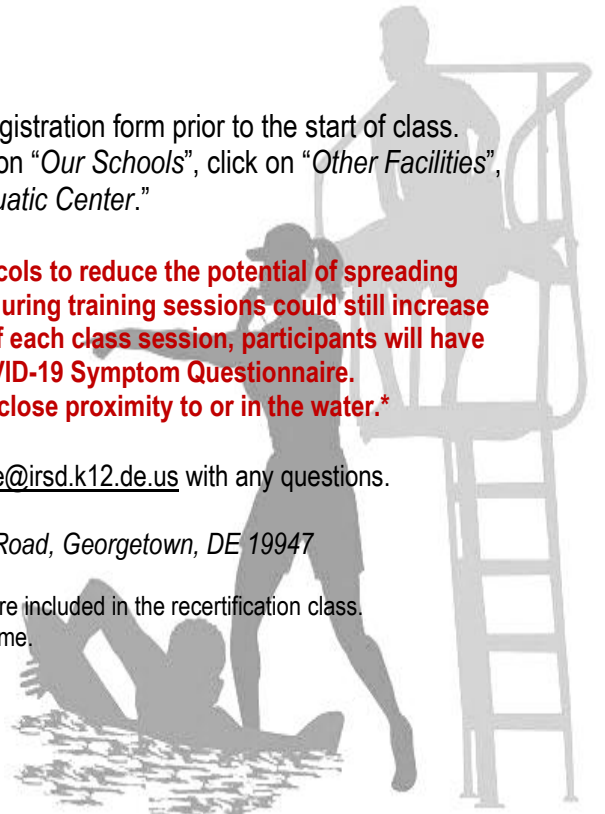
Payment needs to be mailed to Howard T. Ennis School with the registration form prior to the start of class. Registration form is located on the district website www.irsd.net. Click on "Our Schools", click on "Other Facilities", and then click on "Dr. Lorraine Wray Aquatic Center."

The instructors have put in place preventative measures and protocols to reduce the potential of spreading COVID-19, however the inherent person to person contact that exists during training sessions could still increase your risk of exposure and/or contracting the virus. Prior to the start of each class session, participants will have their temperature checked and will have to answer the COVID-19 Symptom Questionnaire. Masks will be required at all times unless the participant is in close proximity to or in the water.

Please contact Keri Justice at (302) 856-1930 or email: keri.justice@irsd.k12.de.us with any questions.

Payment Address: *Howard T. Ennis School, 20346 Ennis Road, Georgetown, DE 19947*

If you are a part of this class, you will need to practice. The practices are included in the recertification class. Please contact us to arrange pool time.



LIFEGUARD RECERTIFICATION CLASS REGISTRATION FORM

**PLEASE PRINT AND MAIL THIS FORM
WITH YOUR CHECK TO:**

Howard T. Ennis School
20346 Ennis Road
Georgetown, DE 19947

REGISTRATION FORM

STUDENT NAME: _____ DOB: _____

PARENT NAME: _____ PHONE: _____

ADDRESS: _____

STUDENT'S EMAIL: _____

Lifeguard Training Class: \$175.00

Prerequisite:

Must have current Red Cross Lifeguard Certification Please attach a copy of your certification to this registration form.

Training Classes: (Check Selection)

March 28, 2021 9:00 am – 7:00 pm

April 11, 2021 9:00 am – 7:00 pm

Total \$ _____

Make Checks Payable to "Dr. Lorraine Wray Aquatic Center"

**You must include your telephone number and
driver's license number on your check.**

ATTENTION ADULTS / PARENTS

Students and adults enrolling must have this form signed by themselves or their parent(s) or guardian. Every participant must also be covered by some type of accident or health insurance. **PLEASE SIGN AND SEND THIS FORM WITH YOUR CHILD'S REGISTRATION OR YOUR REGISTRATION.**

_____ has my permission to participate in _____ Lifeguard Recertification Class _____. In consideration of his/her granted permission to enroll and be a student in a class offered by the Indian River School District, I do hereby expressly assume the risk of all personal injury and any other loss or damage which he/she may suffer regardless of the cost resulting in such personal injury, loss or damage and to expressly absolve the said Indian River School District, its Board of Education, and its agents, servants, employees and instructors from all liability therefore and do hereby agree to indemnify and hold harmless the said Indian River School District, its Board of Education, and its agents, servants, employees and instructors from all losses, damages, cost or expenses arising out of any personal injury, loss or damage which my child, his/her heirs, executors, administrators, or assigns may sustain as a result of him/her being injured while a student in the class referred to above. I also certify that I am or my child is covered under an accident and health insurance policy, which covers his/her participation in the course.

Adult / Parent Signature

Date

FORM MUST BE SIGNED AND DATED

**QUESTIONS OR CONCERNS: Please call Keri Justice at (302) 856-1930
or email keri.justice@irsd.k12.de.us**