

CERTIFICATION REGISTRATION FORM

	PARTIC	CIPA	NT I	NFOF	MAT	ION				
Participant's First Name: Last Name:					Birth date:		Age:	Sex:		
Street address:				City & State:			Zip:			
Email:				Are you a UNLV Student? ☐ Yes ☐ No Are you a SRWC Member? ☐ Yes ☐ No						
	EMERGENC	Y CC	DNT	ACT II	IFOR	MATION				
Emergency Contact Name:			Relationship:				Phone	Phone:		
Adult CPR/First Aid/AED				Lifeguard Certification						
	Full Certification Course (3 hours)	\$125				Lifeguard F	Prep Course	e (1 hour)	\$20	
	Recertification (1 hour)	\$75			LG	LG Full Certification Course (26 hours) \$200			\$200	
					LG Review/Recertification (13 h			n (13 hours)	\$100	
Lifeguard Instructor Certification				Water Safety Instructor Certification						
	Full LGI Certification (24 hours) \$200				☐ Full WSI Certification (29 hours) \$225					
I unc	derstand that I must attend the entire course to qualify fo ssed, refunds will not be given.	r a cer	tificat	ion. If p	e-requ	isites are faile	ed prior to the	e start of the class	or a class	
Participant Signature				Date						
OFFICE USE ONLY Date:					-	Red	ceipt #:		-	
Method of Payment: □ Cash □ Check □VISA □ MC □ AMX				Clerk Initials:						