

Gravelbourg & District Aquaplex Centre

2015 Advanced Water Leadership Registration Form

(1 form per participant)

Name of participant:	AGE:
Date of birth:	
Mailing Address:	
Phone (home):	Phone (work):
Phone (cell):	
Parent/Guardian:	E-mail:

Does the participant have any health concerns? Please circle: YES or NO

Health problem/medication	Action to be taken by participant	Action to be taken from staff

Please choose the course(s) that you'd like to take:

Please <input checked="" type="checkbox"/>	Leadership Course	Date	Required Materials	Cost
	National Lifeguard	May 9, 10, 16, 17 & 18	Paper & pen; water bottle & snacks; Canadian Lifesaving Manual; whistle with coil; 2 + bathing suits and 2 + towels; driver's license (proof of age); copy of Bronze Cross certificate (need not be current)	\$312.50
	National Lifeguard Recertification	May 18	Everything listed above	\$93.75

Total: \$ _____ Paid by: Please circle Cash Cheque - # _____

Make your cheque payable to the Gravelbourg & District Aquaplex Centre

Please mail to:
Sports, Culture & Recreation Office
Box 1073, Gravelbourg, Sask. S0H 1X0

Please note:

- **PARTICIPANTS WILL NOT BE REGISTERED UNTIL PAYMENT IS RECEIVED.**
- Post dated cheques will not be accepted.
- Your receipt of registration can be picked up at the Aquaplex Office once the course begins.
- Refunds will only be given if a doctor's note is presented. All refunds are subject to a \$5.00 Administration Fee.
- Gravelbourg & District Aquaplex Centre reserves the right to make schedule changes or cancel programs due to insufficient registration.

The Aquaplex Supervisor:

1. Reserves the right to request any registrant to withdraw from the program prior to its termination if in the opinion of the Aquaplex Supervisor or Staff, the registrant is not acting in a reasonable manner.
2. Reserves the right to cancel, with 100% refund, any session due to any circumstances that are not to the benefit of the registrant or the program.

Signature of Parent/Guardian: _____ Date: _____

Signature of Aquatic Supervisor: _____ Date: _____

You will receive a copy of this registration. Please keep it on file as it will become your official receipt.