

**City of Orange Beach
Aquatics Center
Lifeguard Training
(251) 974-7946**

Jr. Lifeguard Registration Form

Name: _____

Age: _____

Address: _____

Phone: _____

Parent's Name: _____

Fee: \$100.00 **Method of Payment** Cash _____ Check _____

Waiver of Liability

I, _____ Lifeguard Program Participant, do hereby waive any and all claims, damages, or liabilities against the City of Orange Beach and its agents, servants, and employees from any harm or loss of said participant. In Acknowledgement of this waiver, I recognize that the Lifeguard participant may be participating in training and events that he/she could be harmed if he/she does follow all rules and directions of the Lifeguard Instructors. Therefore it will be the responsibility of the said participant for any and all liability and or injuries and results of injuries and or loss.

Lifeguard Participant

Date

Parent or Guardian

Date