

400 Doansburg Road, Box 719  
Brewster, NY 10509-0719  
845.279.2995  
www.greenchimneys.org



## Lifeguard Course/CPR Registration Form 2020

Payment and Registration form **MUST** be received no later than 1 week before first day of class unless an exception was agreed upon by both parties.

Please mail payment and registration form to:

Green Chimneys  
400 Doansburg Road  
Brewster, NY 10509  
Attn: Paige Cahill - Recreation

### Please print clearly

Course Name: \_\_\_\_\_

Date & Time: \_\_\_\_\_

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Student's Email: \_\_\_\_\_

Emergency Contact: (name and phone) \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Do you have any special needs or accommodations? \_\_\_\_\_

Consent to treat in case of an emergency: \_\_\_\_\_



## CERTIFICATION REFUND POLICY

I understand that if I am able to complete the pre-requisite skill session for any reason, I will not be allowed to continue in the Lifeguard Certification Course.

My two options are:

- A- Received a \$400 refund minus the \$50 processing fee or
- B- Try again at a later class (as long as a later class exists)

The charge of \$50 for processing fee is non-negotiable and non-refundable.

I ACKNOWLEDGE THAT IF I BEGIN MY CERTIFICATION CLASS BUT DO NOT COMPLETE OR PASS IT FOR ANY REASON I UNDERSTAND THAT I WILL NOT BE ELIGIBLE TO RECEIVE A REFUND.

## CANCELLATION POLICY

Notification of cancellation must be received one week prior to the start of the scheduled class to avoid a 25% cancellation fee.

## PAYMENT INFORMATION

We accept checks, cash, or major credit cards. Please make checks payable to Green Chimneys. You will be responsible for an insufficient funds fee of \$35 if your payment is returned.

Check 1 #: \_\_\_\_\_  Check 2 #: \_\_\_\_\_  Cash  
 VISA  MASTERCARD  AMERICAN EXPRESS

Name on card: \_\_\_\_\_

CC#: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Card Security Code: \_\_\_\_\_

Please mail check or money order for the amount displayed on the "Class Schedules" page to the address listed above.

## WAIVER OF LIABILITY

I the undersigned or parent/legal guardian of the individual named above do hereby waiver, release, and discharge all claims for damages, death, and personal injury, property damage which I may have or which may hereafter accrue to me as a result of participation in said activity. I understand that accidents can occur during said activity. Knowing the risks of said activity, I hereby agree to assume those risks. This release is attended to discharge and hold harmless Green Chimneys and any participating certified instructor from liability. This waiver and assumption of risk is to be binding on my heirs and assigns.

I have read and accept the above policy.

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Student Signature

Date

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Parent / Guardian Signature *(Under age 18 only)*

Date