

Sussex County YMCA

American Red Cross

Recertification Lifeguard Training Class Registration Form

Name: _____ Date of Birth _____

Address: _____

Town: _____ State/Zip: _____

Phone: _____ Cell: _____

e-mail: _____

Class Dates (Check one):

Lifeguard Recertification

Check one

Monday & Thursday	March 15 & March 18	6:00-9:30	
Monday & Thursday	May 24 & 27	6:00-9:30	
Saturday	June 12	7:00-3:30	

Please note: pre-registration and payment is required for all classes. Class size is limited, please register early.

Member: \$80.00

Non Member: \$120.00

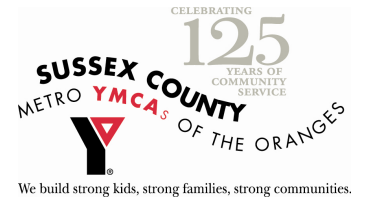
Total enclosed: \$ _____ Check (payable to Sussex County YMCA)

_____ Credit Card (circle one) VISA MC Discover AMEX

Card # _____ Exp Date: _____

Signature _____

Sussex County YMCA
15 Wits End Rd
Hardyston, NJ 07419
Phone: 973 209-9622 / Fax: 973 209-1483



Office Use only: Member/Non-Member Receipt # _____

** Review refund policy and check initials. Staff Signature _____