



Name		Member #
Address		
City	Province	Postal Code
Home Ph		Cell Ph
E-mail		Birthdate

1. AQUATIC EXPERIENCE

Number of years in Aquatics	
Most Current Position	
Currently Employed by	

2. POST-SECONDARY EDUCATION (Please complete appropriate sections)

Certificate(s)	
Diploma	
Degree	
Relevant Workshops or Other Training	

3. AQUATIC CERTIFICATIONS (Please check all that apply)

Lifesaving Society Certifications

- Lifesaving Instructor
- National Lifeguard
- First Aid Instructor
- Lifesaving Instructor Trainer
- National Lifeguard Instructor
- National Lifeguard Recert Conductor
- NL Instructor Trainer
- Branch Trainer
- _____

Other Certifications

- _____
- _____
- _____

Red Cross Certifications

- Water Safety Instructor
- First Aid Instructor
- Master Instructor Trainer
- _____

YMCA Certifications

- Instructor
- Instructor Trainer
- _____

- _____
- _____
- _____

