

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

**Lifeguard Registration Form**

**Name:** \_\_\_\_\_

**Age:** \_\_\_\_\_

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

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Fee:** \$125.00      **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