CALIFORNIA JUNIOR LIFEGUARD PROGRAMS APPLICATION 2018

SELECT DESIRED DATES AND PROGRAMS BELOW

949-257-2254 JRLIFEGUARDS.COM 714-901-9030

SALT CREEK JUNIOR LIFEGUARD PROGRAMS

(3 weeks, Mon-Fri, 9 am - 3 pm, at Niguel Road and P.C.H.) **$490**

- ☐ FIRST SESSION: JUNE 11th - JUNE 29th
- ☐ SECOND SESSION: JULY 2th - JULY 20th
- ☐ THIRD SESSION: JULY 23rd - AUG. 10th

SALT CREEK - "ESSENTIAL" JUNIOR LIFEGUARD PROGRAMS

$245

- ☐ DP EJG #01 June 11th - June 14th
- ☐ DP EJG #02 June 18th - June 22nd
- ☐ DP EJG #03 June 25th - June 29th
- ☐ DP EJG #04 July 2nd - July 6th (no 4th)
- ☐ DP EJG #05 July 9th- July 13th
- ☐ DP EJG #06 July 16th - July 20th
- ☐ DP EJG #07 July 23rd - July 27th
- ☐ DP EJG #08 July 30th - Aug. 3rd
- ☐ DP EJG #09 Aug. 6th - Aug. 10th
- ☐ DP EJG #10 Aug. 13th - Aug. 17th

BACK BAY SUMMER CAMPS (Newport Dunes Resort Mon-Fri, 9AM to 3PM)

$260

- ☐ BBSC #01 June 11th - June 14th
- ☐ BBSC #02 June 18th - June 22nd
- ☐ BBSC #03 June 25th - June 29th
- ☐ BBSC #04 July 2nd - July 6th (no 4th)
- ☐ BBSC #05 July 9th - July 13th
- ☐ BBSC #06 July 16th - July 20th
- ☐ BBSC #07 July 23rd - July 27th
- ☐ BBSC #08 July 30th - Aug. 3rd
- ☐ BBSC #09 Aug. 6th - Aug. 10th
- ☐ BBSC #10 Aug. 13th - Aug. 17th
- ☐ BBSC #11 Aug. 20th - Aug. 24th

BACK BAY "Jr. Guard & SUP" (Newport Dunes Resort Mon-Fri, 9AM to 3PM)

SUP HALF DAY & JR GUARD HALF DAY= FULL DAY FUN

$310

BEST OF BOTH CAMPS IN ONE

- ☐ BBC SUP #01 June 11th - June 14th
- ☐ BBC SUP #02 June 18th - June 22nd
- ☐ BBC SUP #03 June 25th - June 29th
- ☐ BBC SUP #04 July 2nd - July 6th (no 4th)
- ☐ BBC SUP #05 July 9th - July 13th
- ☐ BBC SUP #06 July 16th - July 20th
- ☐ BBC SUP #07 July 23rd - July 27th
- ☐ BBC SUP #08 July 30th - Aug. 3rd
- ☐ BBC SUP #09 Aug. 6th - Aug. 10th
- ☐ BBC SUP #10 Aug. 13th - Aug. 17th
- ☐ BBC SUP #11 Aug. 20th - Aug. 24th

STAND UP PADDLE CAMP (Newport Dunes Resort Mon-Fri)

$230

- ☐ *Morning 9AM to 11:30AM*
- ☐ SSC SUP #01 June 11th - June 14th
- ☐ SSC SUP #02 June 18th - June 22nd
- ☐ SSC SUP #03 June 25th - June 29th
- ☐ SSC SUP #04 July 2nd - July 6th(no 4th)
- ☐ SSC SUP #05 July 9th - July 13th
- ☐ *Afternoon 12:30PM to 3:00PM*
- ☐ SSC SUP #06 July 16th - July 20th
- ☐ SSC SUP #07 July 23rd - July 27th
- ☐ SSC SUP #08 July 30th - Aug. 3rd
- ☐ SSC SUP #09 Aug. 6th - Aug. 10th
- ☐ SSC SUP #10 Aug. 13th - Aug. 17th
- ☐ SSC SUP #11 Aug. 20th - Aug. 24th

CANCELLATION and REFUND POLICY - PLEASE READ CAREFULLY

Please read this carefully. Please understand that we have a limited number of positions for each camp or program. When you reserve a spot we hold it just for you: we do not over-book our activities. We must adhere to these cancellation policies since we cannot insure your participation or be responsible for any personal problems, illnesses, or circumstances which may change your plans.

A: FULL Refund: If we cancel a camp or session you will have the option of getting a full refund or transferring to another class without paying the transfer fee.

B: PARTIAL refund: If you choose to cancel or transfer your reservation three weeks or more before your class we will gladly refund your fee less a $150.00 (Non-refundable deposit) or reschedule you for a $30 per person service charge.

C: NO refund will be given if you cancel less than three weeks before your camp or fail to attend all or part of your camp. This is regardless of any personal problem, illnesses or circumstances which may change your plans. Credit or transfers within this period are not possible.

Hubert's LEMONADE · ALOE UP sun and skincare · JACKS SURFBOARDS · CLIF KID

PARTICIPANT

LAST NAME: _____

DATE OF BIRTH: ___/___/___ (Month / Day / Year) FIRST NAME: _____

SEX: ☐M ☐F SCHOOL: _____

HISTORY OF MEDICAL PROBLEMS: ☐NONE _____

This field cannot be left blank! If the participant has no medical problems check NONE!

PARENT/GUARDIAN

LAST NAME: _____

HOME: ( ) _____ FIRST NAME: _____

WORK: ( ) _____ ADDRESS: _____

CELL: ( ) _____ _____

(CITY) (STATE) (ZIP)

E-MAIL: _____

EMERGENCY CONTACTS (OTHER THAN PARENT/GUARDIAN)

Please list the Names and Daytime Phone Numbers for 2 alternate individuals to be contacted in case of an emergency. (We will always try to contact the above listed parents first!)

NAME: _____ PHONE: ( ) _____

NAME: _____ PHONE: ( ) _____

HOW DID YOU HEAR ABOUT OUR PROGRAMS

- ☐ I AM A RETURNING PARTICIPANT
- ☐ FRIEND or FAMILY MEMBER (NAME) _____
- ☐ INTERNET / OTHER (SPECIFY) _____

RELEASE AND HOLD HARMLESS AGREEMENT / AUTHORIZATION FOR TREATMENT OF MINOR

For and in consideration of the participation in all California Junior Lifeguard Programs and/or Super Surf Camps, and with complete understanding that said participant shall take a physical test of swimming skills and also will engage in various physical activities on the beaches and waters of the Pacific Ocean, I/we, the undersigned (father and mother and /or guardian) of said participant, a minor, do forever release, acquit, discharge, and hold harmless California Junior Lifeguard Programs Inc., U.S. Ocean Safety, County of Orange, State of California, City of Huntington Beach, City of Laguna Niguel, City of Dana Point, California State Department of Parks, City of Irvine, Newport Dunes Resort and Marina, Irvine Aquatic Center, City of Irvine, Los Caballeros Sports Village its successors, officers, employees, volunteers, servants and agents from any and all action, causes of actions, claims, demands, damages, costs, loss of service, expenses and compensation, on account of or in any way growing out of any and all known and unknown personal injuries and property damage which we may not or hereafter have as parents and/or guardians of said minor, and also all claims or rights of action for damages which said minor has or may hereafter have, either before or after he has received his majority, resulting or to result from of in connection with or participation in and/or arising out of travel to or returning from said program whether or not due to the negligence, act or failure to act of any California Junior Lifeguard Program or Super Surf Camp employee, officer or director. The participant and his/her parent or guardian hereby irrevocably waive the right to file any complaint or proceeding with any state or federal court and agree that any dispute relating to any matter within the scope of this application or program which they are unable to resolve to their mutual satisfaction will be submitted for resolution to a single arbitrator, acceptable to both parties, operating under the rules of the American Arbitration Association, whose decision shall be binding and non appealable and any arbitration costs will be borne equally by all parties. California Junior Lifeguard Programs Inc. reserves the right to use negatives and/or reproductions of photos and or videos to be used in displays, promotions or other purposes. I/We acknowledge that the participants email address may be obtained and used for current and/or future program information and will never be sold or shared with any other entity. We the undersigned, hereby acknowledge to be the lawful parents and/or guardian of the above mentioned minor and we therefore, acknowledge our qualifications to sign the agreement on the behalf of the said minor. Furthermore, in accordance with Chapter 1524, Section 25.8 of the Civil Code of California, I/we give authorization to any physician or surgeon, licensed under the provision of Medical Profession Act, for the said participant to receive medical care and/or emergency treatment when necessary. Any expenditure for care and treatment is my responsibility. I understand that I (my child) will be participating in an activity that could include contact with ocean and/or bay waters. Southern Californian ocean and bay waters are very clean most of the time as indicated by water quality testing. Long-term postings currently exist to advise the public of storm drain outlets and possible risks associated with contamination from urban runoff. If there is any change in the water quality, which necessitates a closure of these waters, there may be an adjustment to the planned program content as described in the program brochure due to the impacts of these water quality issues.

Signature of parent or guardian *(REQUIRED)* **Please Print Name** **Date Signed**

A $150, PER PARTICIPANT PER SESSION, NON-REFUNDABLE DEPOSIT IS REQUIRED WITH YOUR APPLICATION

Please charge: $_____ to my credit card # _____

Exp. Date: ___/___ Sec. Code: _____ Signature: _____

MAIL COMPLETED APPLICATION AND FEES PAYABLE TO:
CALIFORNIA JUNIOR LIFEGUARD PROGRAMS P.O. BOX 1639
HUNTINGTON BEACH CA • 92647-1639 • PHONE (714) 901-9030

(Office Use Only) DNP/DNF INT

T/O Date: _____ _____ _____ Tread Water: ☐

Swim Time: _____ _____ _____ Under: Water: ☐