



Wildwood Beach Patrol Junior Lifeguard Camp Registration Form

Chief Louis A. Cirelli, Jr.

Junior Lifeguard's Name: _____

Date of Birth: ____/____/____ Age: _____

Grade (Upcoming School Year): _____

Seasonal Address: _____

Phone number: (____) _____

Emergency contact: _____

Emergency contact #: _____

Swimming Skills (please circle one): Beginner Intermediate Advanced

Medications: _____

Health Conditions: _____

Shirt Size: (Youth) S M L (Adult) S M L

Application Fee: \$25.00

Date Paid: ____/____/____ Cash: ____ Check: ____ Check #: ____

WBP Junior Lifeguard Camp Participation Waiver:

I, as Parent/Guardian of _____, hereby release and give up any and all claims and rights I may now or in the future have against the City of Wildwood with regard to the Junior Lifeguard Camp. This release shall include any and all claims that _____ or I may now or in the future have for injuries sustained by _____ as a result of his/her participation in the Junior Lifeguard Camp. I understand that in exchange for this release, the City of Wildwood is allowing _____ to participate in the Junior Lifeguard Camp.

Date

Parent/Guardian Signature