

Employee Lifeguard Training Agreement

681 Hollins Ferry Road, Suite D Glen Burnie, MD 21061 Phone • 410-761-7665 • 888-785-7665 Fax • 410-761-4999

Participant's Name:		Age	of Class:	
Fee Schedule				
	Non-DRD Employee	DRD Employee (Prior to class)	DRD Employee (Paycheck Deduction)	DRD Employee <u>Training Reimbursement</u>
Lifeguard Training Lifeguard Training Recert	\$430 \$405	\$230 \$120	\$255 \$145	\$125 \$ 75
Includes: Lifeguard Training Certification, CI Apparel Package Contents: Lifegu Lifegu	ard Training: S	wim Suit, T-Shirt or		Apparel Package.
1. The participant must be 2. The participant and par 3. The participant agrees to Note: 250 hours represed. The participant agrees to Note: 250 hours represed. The participant agrees to his/her termination of ed. If the participant fails to fulfill the to will not be eligible for the discounter above. Payment of the balance of the termination of employment. If payment is not be participant fails to fulfill the to will not be eligible for the discounter above. Payment of the balance of the termination of employment. If payment is not participant fails to fulfill the to will not be eligible for the discounter above. Payment of the balance of the termination of employment. If payment is not participant fails to fulfill the to will not be eligible for the discounter above.	cipant must agree a current DRD ent (if applicable to work at least ents an average to work through employment with erms of the this ed DRD Employne tuition will be nent is not made	ree to the following to employee or DRD le) must sign the Em 250 hours during the of 18 hours per week Labor Day weekened DRD Pools. Employee Lifeguard weekened to be uition fee and we made by the particle within seven days,	terms and conditions: employee in the upcoming ployee Lifeguard Training ecourse of the upcoming of the upcomi	ng Agreement. g summer. ol season. with two weeks written notice of tis expressly understood that he or she e full Non-DRD Employee fee outlined
office or to training classification. OR B) The participant must 3. The participant will be The participant agrees to save harm Management, Inc., DRD Pool Servi The participant warrants and represe active or passive exercise, or that we engage or participate. The participat have no obligation to perform fitness	ee reimbursemenditions: aditions outlined we a cumulative as by the first december of the analysis of the anal	nt, the participant med for Training Discover GPA of 3.5 or great any of training. circle A or B) ORD veteran. ing reimbursement the stitute of Technological distributions and disability, in all or adverse to such as and agrees that Dissimilar testing to dealld consult with a phase of the similar testing to dealld consult with a phase of the similar testing to dealld consult with a phase of the similar testing to dealld consult with a phase of the similar testing to dealld consult with a phase of the similar testing to dealld consult with a phase of the similar testing to deal the similar testing the	unt. tter. Verification of GPA the first pay date in Octol gy, Goucher College, Ma ors and the management apairment, or ailment pre a person's health, safety, RD Pool Management, I etermine the participant's	A must be delivered to the DRD per. ays Chapel Swim Club, DRD Pool of the club from any and all liabilities.
Participant's Signature	Date		Signature pant is less than 18 years of ag	Date