

JUNIOR LIFEGUARD PROGRAM Summer 2025

July 14th – July 25th

	Participant Name:	Shirt Size: Youth or Adult S, M, L, XL
	Address:	
	Sex: Age: Date of Birth:	
	Parent Name(s) or Guardian:	
Phone	: Email:	
	Emergency Contact:Phone:	

Any medical considerations? Please explain below:

The undersigned parent or legal guardian of participant in the sports and recreational activities provided by Okaloosa County understands that participation in any sport or recreational activity subjects the participant to a certain degree of risk or injury and that Okaloosa County or the Okaloosa Junior Lifeguard Association will not be liable for medical expenses or other claims for damages based upon injury to the participant as a result of his/her participation in these sports or recreational activities. Accordingly, any insurance protection that the participant may want or need must be obtained by the participant himself/herself or by the parent or guardian.

Legal Guardian Name _____

I have read the above and understand it and hereby agree that I will not hold Okaloosa County liable for any injuries that may occur as a result of participation in the recreation activities provided by Okaloosa County.

Signature: ______Date: ______Date: ______Date: ______

Session- \$325 Registration Fee: \$_____ Paid by: Cash__ Check__

All sessions will be from 0900 till 1600. Please ensure drop off and pick up times are followed.

We will meet at the Beach Safety Head Quarters at the Boardwalk on Miracle Strip Parkway next to Anglers on Okaloosa Island for the start of each day.

If you have any questions, please contact Lt. Shiloh Robertson at (850)-259-3999.