



The Atlantic City Beach Patrol 2024 Junior Guard “Minnows” Day Camp Program

Registration Form and Release of Liability Waiver

The Junior Lifeguard Day Camp Program for the summer of 2024 is a free program and is open to male and female applicants ages 8-13. The location of the camp will be held on Providence Avenue and the beach **starting Thursday, July 11, 2024** and will be held every **Thursday** for **5** sessions with the last camp being **Thursday August 8, 2024**. All Participants will meet outside at the Albany Avenue lifeguard station starting at **11:00AM and running until 3:00PM**. The Albany Avenue lifeguard station will be the drop off and pick up location.

The purpose of the program is to introduce basic lifesaving skills and rescue techniques as an educational and physical training foundation for future prospective beach patrol employees. Participants will learn ocean safety and rip current awareness and how to use the lifeguard equipment safely. Beach patrol instructors will teach the basic skills of C.P.R. and first aid, surf dashing, rowing, and swimming through the surf. Participants will also be involved in team building activities, an ocean safety poster contest, and beach games.

Participants will need to wear a swim suit, bring workout clothes, sunglasses and sunscreen. Please bring a towel, goggles, swim cap and a change of clothing as needed. Lunch and beverages will be provided for the camper’s daily courtesy of the Atlantic City Beach Patrol Benevolent Organization (**ACBPBO**) and our sponsors. Please bring any additional preferred food and snacks.

2024 Junior Guard Minnows Registration

Last Name: _____ First Name: _____ Age _____ DOB _____

Address _____ Youth T-shirt size: S M L XL

Parent/Guardian Name: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

Email: _____ Swimming Experience/Team: _____

Release of Liability Waiver (Mandatory)

In consideration of participation in the Atlantic City Beach Patrol Junior Guard Day Camp Program, the undersigned:

1. I understand that I am financially responsible for any and all medical bills incurred by my child while participating in this Junior Lifeguard program. I fully understand that the participant will be engaging in activities that involve risk and injury to themselves. In case of emergency, I grant permission for my child to be given emergency treatment by the appropriate medical personnel.
2. In consideration of the use of the premises, equipment, and facilities owned or operated by the City of Atlantic City and/or in consideration of permitting to participate in activities of this Junior Lifeguard program, on behalf of myself, my heirs, administrators, successors, or assigns. I hereby release and forever discharge the Atlantic City Beach Patrol and the City of Atlantic City, their agents, and employees of and from any and all suits or causes of action, damages, claims or demands, arising out of my child’s participation in the Junior Lifeguard program, including but not limited to death, personal injury or property damage.
3. I hereby Grant full permission to any and all forgoing to use photographs, videotapes, or any other record of this event for any purpose.
4. Warrant that the minor is in good health and has no physical condition that would prevent the minor from participation in the event or activity.

I/We have read the above waiver and release, understand that we have given up substantial rights by signing it and have signed voluntarily. I the parent/legal guardian, consent to the minor’s participation in the Atlantic City Beach Patrol Junior Lifeguard Day Camp Program.

Signature of Parent/Guardian _____ Date _____

APPLICATION/WAIVER CAN BE RETURNED VIA EMAIL TO:

ACBP.JUNIORGUARD@GMAIL.COM

OR HAND DELIVERED TO:

DISTRICT 10 – ALBANY AVENUE BEACH PATROL STATION- ALBANY AVENUE AND THE BEACH