

**2015 ONTARIO LIFEGUARD CHAMPIONSHIPS**  
**Registration Package**

***The Lifesaving Society invites you to the annual Ontario Lifeguard Championships  
hosted by the Town of Newmarket***

**DATE** August 1 & 2, 2015

**LOCATION** Town of Newmarket – Magna Centre, Metro Aquatic Centre, 800 Mulock Drive, Newmarket, ON, L3Y 9C1. 905-953-5301. See [www.lifesavingsociety.com](http://www.lifesavingsociety.com) for map.

**COMPETITION** The competition is sanctioned by the Lifesaving Society. Event rules will be in accordance with the 2013 Edition of the *ILS Competition Manual*, the 2012 Edition of the *Canadian Competition Manual*, the 2013 Edition of the *Ontario Competition Manual*, and any 2015 Communiqués. Go to [www.lifesavingsociety.com](http://www.lifesavingsociety.com) for details.

**ELIGIBILITY** All competitors must hold a current National Lifeguard certification and be a registered athlete. Competitors must be at least 16 years of age by August 1, 2015.

**EVENTS**

First Aid	Obstacle Relay
Water Rescue	Medley Relay
Priority Assessment	Manikin Relay
	Line Throw Relay
	Lifeguard Skills Relay

**ENTRY DEADLINE** **Registration must be received by Wednesday July 22, 2015.** Refunds will not be issued after July 22<sup>nd</sup>, nor will they be issued for clubs or competitors who fail to show up for the Championships.

**ENTRY FEES**

<u>Competitor Fee</u>	<u>Technical Event Entry Fee</u>	<u>Relay Event Entry Fee</u>
\$20.25 per each competitor	\$25.25 per team per event	\$10.10 per team per event

**ACCOMMODATION** Comfort Inn Newmarket, 1230 Journey's End Circle, Newmarket, 905-895-3355. Please specify **Lifesaving Society** when booking your room to get the \$115.00 (plus tax) room rate, maximum of 4 people per room, includes breakfast, parking, & wireless internet. **Booking deadline is June 30, 2015.**

**REGISTRATION** Send registration form with method of payment – cheque (payable to the Lifesaving Society), money order, purchase order, VISA, American Express or MasterCard – to:

Lifesaving Society	Phone: 416 490 8844
2015 Championship Registration	Fax: 416 490 8766
400 Consumers Road	Email: <a href="mailto:sport@lifeguarding.com">sport@lifeguarding.com</a>
Toronto, Ontario M2J 1P8	

## **ONTARIO LIFEGUARD CHAMPIONSHIPS – SCHEDULE**

### **Friday July 31<sup>st</sup>**

7:00 – 9:00 pm Check-in – Club/Team  
7:00 – 9:00 pm Key Officials Meeting

### **Location**

Magna Centre, Newmarket

### **Saturday August 1<sup>st</sup>**

8:00 am Coaches Meeting  
8:30 am Officials Meeting  
9:00 am Official Ceremonies  
9:30 am Lock-Up for Water Rescue (Prelims)  
10:00 am – 12:00 pm Water Rescue (Prelims)  
12:30 pm Lock-Up for First Aid (Prelims)  
1:00 – 2:30 pm First Aid (Prelims)  
3:00 pm Lock-Up for First Aid (Finals)  
3:30 – 5:00 pm First Aid (Finals)  
5:00 – 6:00 pm Warm Up for Relays (Finals)  
6:00 – 8:30 pm 4 x 25m Manikin Relay (Finals)  
4 x 50m Medley Relay (Finals)  
4 x 50m Obstacle Relay (Finals)  
Line Throw Relay (Finals)  
Lifeguard Skills Relay (Finals)

Magna Centre, Newmarket

### **Sunday August 2<sup>nd</sup>**

8:30 am Coaches Meeting  
9:00 am Officials Meeting  
9:30 am Lock-up for Water Rescue (Finals)  
10:00 am – 12:00 pm Water Rescue (Finals)  
12:30 pm Lock-Up for Priority Assessment (Prelims)  
1:00 – 3:00 pm Priority Assessment (Prelims)  
3:30 pm Lock-Up for Priority Assessment (Finals)  
4:00 – 5:30 pm Priority Assessment (Finals)  
6:00 pm Awards

Magna Centre, Newmarket

# ONTARIO LIFEGUARD CHAMPIONSHIPS

## Club Registration

Please use one form for each club (Type or BLOCK letters only).

Club or Affiliate		
Mailing address		Apt or Suite
City	Province	Postal Code
Coach Name		(     ) Home/cell Phone
Email (that will be checked regularly in the week preceding the Championships)		(     ) Business Phone
<b>Note:</b> Each completed registration must include the following forms: Registration with payment, Waiver & Release, Event Entries.		
Competitor fee @ \$20.25 / per person =		
Technical Event Entry fee (per team per event) @ \$25.25 / event =		
Relay Event Entry fee (per team per event) @ \$10.10 / event =		
TOTAL AMOUNT OWING		

<b>Payment</b>		
<input type="checkbox"/> Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> Visa
<input type="checkbox"/> Master Card	<input type="checkbox"/> AMEX	<input type="checkbox"/> P.O. #
Credit Card #	Expiry Date	
<hr/>		
<hr/>		
Card holder name	Card holder signature	

Mail, fax or email:  
Lifesaving Society  
2015 Championship Registration  
400 Consumers Road  
Toronto, Ontario M2J 1P8  
Fax 416 490 8766  
Email [sport@lifeguarding.com](mailto:sport@lifeguarding.com)

## **ONTARIO LIFEGUARD CHAMPIONSHIPS**

### **Waiver & Release Form**

*Please read carefully before signing*

1. **Conduct**

I agree to abide by the rules, regulations and code of conduct of the championship, and further to behave in a manner consistent with ideals of good sportsmanship.

2. **Voluntary Assumption of Risk**

As a competitor in a lifeguard competition, I recognize that there are certain risks inherent in the activity as a result of factors including but not limited to, stress, number of people, water temperature and conditions. I have prepared myself for the competition and know of no factor or condition which should be disclosed to the organizers or which would make it unsafe for me to compete. I voluntarily assume all risks, both physical and legal including but not restricted to, loss of or damage to property, and personal injury including permanent disability or death.

3. **Waiver of Liability**

As a condition of entry and in consideration of my application as an individual or as a part of a team being accepted, I hereby waive my right to make any claim, whether for negligence or otherwise against the Lifesaving Society, the host, the facility operator, owner or occupier, the sponsors, the organizing committee or any of the servants, agents, affiliates, volunteers, judges, officials or other persons involved in the organization or running of the competition, events or associated activities. I further agree to indemnify and hold harmless all of the above, from any claim made on my behalf or as a result of injury to my person or property. I recognize that competitors are responsible for their own medical coverage.

4. **Model Release**

I transfer to the Lifesaving Society all rights whatsoever which I have in photographs and/or videos which photographers may have taken. I consent to the use of the photographs/videos for all purposes whatsoever, including without limitation, television, publications, and any trade or advertising purposes.

*I have carefully read and understood the four conditions of entry and in consideration for being allowed to compete, I have executed them voluntarily intending to be bound thereby and intending these conditions to be binding of my heirs, personal representatives and assigns.*

***Print name***

***Signature (Parent if under 18)***

***Date***

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
COACH: _____	_____	_____

## ONTARIO LIFEGUARD CHAMPIONSHIPS

### Team Event Entry – Technical

*Please use one form for each team.*

Club: \_\_\_\_\_

Coach: \_\_\_\_\_

A team must consist of three or four competitors with any combination of males or females for any simulated emergency response event. Team composition must remain the same for heats and finals in any simulated emergency response event. Competitors are allowed to enter each event only once. Please identify with a letter the group of 4 athletes who are on the same team. **PLEASE PRINT CLEARLY.**

Competitor Name & Gender		Registered Athlete Number	Date of Birth (yy/mm/dd)	First Aid	Water Rescue	Priority Assessment	Total events
Jane Smith	M F			A	B	A	3
	M F						
	M F						
	M F						
	M F						
	M F						
	M F						
	M F						
	M F						

# ONTARIO LIFEGUARD CHAMPIONSHIPS

## Team Event Entry – Physical

Please use one form for each team.

Club: \_\_\_\_\_

Coach: \_\_\_\_\_

A team must consist of two males and two females for any relay event. Event entries must indicate personal best times for seeding purposes. Teams for who no times are submitted will be considered to have the slowest times. Competitors are allowed to enter each event only once. Please identify with a letter the group of 4 athletes who are on the same team. **PLEASE PRINT CLEARLY.**

Competitor Name & Gender		Registered Athlete Number	Date of Birth (yy/mm/dd)	4 x 50 Obstacle Relay	4 x 50m Medley Relay	4 x 25m Manikin Relay	Line Throw Relay	Lifeguard Skills Relay	Total events
Jane Smith	M F			NT	2:03.37	2:10.39	39.24	NT	5
	M F								
	M F								
	M F								
	M F								
	M F								
	M F								
	M F								
	M F								