



LIFESAVING SOCIETY

The Lifeguarding Experts

LIFESAVING SOCIETY

LEADERSHIP RECERTIFICATION CREDIT CARD

Surname _____ Given name _____ Birth date (yy mm dd) _____

Street _____ Apt. # _____ ID # _____

City/Town _____ Prov _____ Postal code _____ Home phone _____

Email _____ Bus. phone _____ Ext. _____

Please ✓ the awards you wish to recertify

	Instructor	Examiner	Inst. Trainer
Swim			
Lifesaving			
Emergency First Aid			
Standard First Aid			
Airway Management			
CPR-HCP			
National Lifeguard			
Aquatic Supervisor			
Patrol Rider			
Pool Operator			
Safety Inspector			
Coach			
Other:			
Other:			
Other:			

For office use - date card(s) issued: _____

CREDIT RECORD

Course _____ Credit value _____

Location _____ Date _____

Evaluator's name or signature _____

Course _____ Credit value _____

Location _____ Date _____

Evaluator's name or signature _____

Course _____ Credit value _____

Location _____ Date _____

Evaluator's name or signature _____

Did you remember to:

Enclose validated credit card totaling three credits.

Calculate the recertification fee based on the number of awards you wish to recertify. (Examiner recert is free if sent with instructor recert credits.)

Enclose cheque, money order, or credit card authorization by the card holder (Visa, MasterCard or American Express) for the recertification fee.

*Send to the LIFESAVING SOCIETY - 400 Consumers Road, Toronto, Ontario M2J 1P8. Ph: 416 490 8844 Fax: 416 490 8766
Email: LD_recerts@lifeguarding.com Web: www.lifesavingsociety.com*

CREDIT CARD PAYMENT AUTHORIZATION 2016

You may submit your credit card and payment by e-mail to LD_recerts@lifeguarding.com as follows:

- Refer to the current Credit List to ensure your credits are valid for the awards you wish to recertify.
- Complete the credit card information above identifying a minimum total of 3 credits.
- Calculate the payment amount: The 2016 fee is \$27.00 for the first leadership award recertified plus \$7.35 for each additional leadership award recertified at the same time to a maximum of \$50.00.
- Complete the credit card payment section below.
- Print or save a copy of the credit card for your records.
- In Adobe Acrobat or Adobe Reader, go to "Attach to e-mail" on the FILE menu or simply click the SUBMIT button. Send to LD_recerts@lifeguarding.com.
- You will receive a copy of your credit card receipt with your new certification card(s).

I authorize the Lifesaving Society to charge my credit card as follows:

Visa MasterCard AMEX

Name on Credit Card _____

Card number _____ Exp date _____

Payment amount (optional)
(we will calculate at the time of processing)

Date submitted _____

OFFICE USE ONLY

Date transaction processed _____

Authorization # _____

Processed by _____