LIFESAVING SOCIETY The Lifeguarding Experts Basic First Aid (Updated 2016)		Contacting F.	Primary assessmore	Rescue breater	- Obstructed airway.	Care for a vior:	Care for external	in al bleeding	/	
Candidates' Names	Age		2	3	4	5	6		esult	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
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12										
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15										
✓ - Satisfactory Performance F - Fail Total Pass Total Fail										
Host information Course information Certification date: YY MM DD () () () () () () () () () () () () ()										
			Facility name (e.g., name of pool) Telephone This section to be completed by the Emergency or Standard First Aid Instructor							
Street address	treet address who taught and evaluated the candidates.									
City Prov. Postal code		Name ID# (optional)								
	(E-mail address ()								
	T	elephone				Signa	ature			