

**East Bay Regional Park District**

# Junior Lifeguard Swim Test

This paper verifies that \_\_\_\_\_ has taken and  
(Participant's Name)  
successfully passed a 25 yard swim test and treaded water for  
30 seconds.

The test was completed at \_\_\_\_\_ on the date of   /  /  .  
(Facility) (month/day/year)



|                              |
|------------------------------|
| Lifeguard's Signature: _____ |
| Parent's Signature: _____    |

**\*\*Congratulations! Please turn this completed sheet in to your Instructor(s) on the first day of your session.\*\***

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|                              |
|------------------------------|
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