SOUTH JERSEY ROWING CLUB
SWIM TEST FORM

All participants of SJRC Programs must be able to pass the following swim test and have a certified Lifeguard or Water Safety Instructor observe and attest to completion of this test by signing the form below.

Name of SJRC Participant: _____

Name of Lifeguard/Water Safety Instructor: _____

      Accreditation and Expiration Date: _____

Location of Test: _____

Swim Test Certification

      I hereby certify that the participant **can swim 100 yards continuously** (using any stroke),

can remain **afloat for at least 5 minutes**, and can **put on a life jacket** while treading water.

Signature of Lifeguard/Water Safety Instructor: _____

Date of Test: _____

Make a copy of your signed test for your records and submit the original to SJRC.

Completed Swim Test forms must be submitted and received prior to participant's first on-the-water session with SJRC.

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