

AQUATICS RESOURCE FORM

Name: _____

Address: _____

Phone #: _____ Cell # _____

E-Mail Address: _____

District _____

Discipline Interests:

- Swimming Lifesaving Canoeing Rowing
- Sailing Kayaking Sail Boarding Snorkeling
- Scuba Motorboating Wakeboarding Waterskiing
- Whitewater Lifeguard training

Merit Badge Counselor

- Swimming Lifesaving Canoeing Rowing
- Sailing Kayaking Sail Boarding Snorkeling
- Scuba Motorboating Wakeboarding Waterskiing
- Whitewater Lifeguard training

Certifications with Training Date:

National Camping School

- Aquatics Instructor, BSA Date _____ BSA Lifeguard Instructor Date _____

BSA Training

- Paddlecraft Safety Date _____ Safe Swim Defense Date _____
- Swim and Water Rescue Date _____ Safety Afloat Date _____

Lifeguard Certifications

- BSA Lifeguard Date _____ ARC Lifeguard Date _____
- YMCA Lifeguard Date _____ Other: _____ Date _____

Watercraft

- PA Boaters License Date _____ ACA Kayaking Date _____
- ACA Adaptive Paddling Date _____ ACA Rafting Date _____
- ACA Canoeing Date _____ ACA Safety and Rescue Date _____

Health and Safety

- CPR/AED Date _____ Wilderness First Aid Date _____
- First Aid Date _____ Other: _____ Date _____

Scuba Instructor

- PADI Date _____ PDIC Date _____
- NAUI Date _____ SDI Date _____
- SSI Date _____ YMCA Date _____
- IDEA Date _____ NASDS Date _____