6					H ₂ 0 Proficiency								st Aid		Recognition & Rescue							
9	LIFESAVING SOCIETY The Lifeguarding Experts Bronze Star (Revised 2014) Side 1: Please print each candidate's name, and contact information legibly.	Date of birth	Entries	Inflate clothes & huddla = 1		_	Rescue drill 2	Object support		-			Land spinal	Victim simulation	Victim recognition	Hand signal communication		In-water search	Rescue with a partner	Rescue non-breathing viza:	Result	
1	name, and contact information legibly.	Ğ	1 1	2	3	4	5	6	7	8	9	10	11	12a	12b	13	14	15	16	17	ď	
Name Address		Year																				
City	Postal Code	Month																				
E-mail	Phone	 Day																				
2 Name		Year																				
City	Postal Code	Month																				
E-mail	Phone	Day																				
3 Name		Voc=																				
Address		Year																				
City	Postal Code	Month																				
E-mail	Phone	Day								$\vdash \vdash$									_			
4 Name		Year																				
Address																						
City	Postal Code																					
E-mail 5	Phone	Day								\vdash					$\vdash \vdash$							
Name		Year																				
Address		Month																				
City	Postal Code																					
E-mail 6	Phone	Day				$\vdash \vdash$				\vdash		$\vdash \vdash$			$\vdash \vdash$				\dashv			
Name		Year																				
Address	5	Month																				
City	Postal Code																					
	Check box if there are more candidates on the	reverse	e side	of thi	s pag	re.		atisfac	tory Pe	erforma	nce	F.	- Fail		l Pass				al Fail Exam			
	This test sheet is Page of Pages.					-								101	Exam			ior	LAdill			
	ctor's name				ID#			n infor	matic	n						am is:		ם סר	¬ ₽^	cort		
					.υπ		Exam	date:		YY	MM	M	DD			urigi	inal (אל ר	□ Re	CUTE		
E-mai (Telep	l address)	anct					Facility	y name	e (e.g.,	name c	of pool)				(Teler) ohone					
	rds information Awards issued by affiliate	gnature Awai	rds not	issued	<u> </u>		This	sectio	n to I	oe con			the Li	ifesav	/ing In			ho ex	amine	d		
Payment information								andid														
Send invoice or receipt to: ()							Instru	ctor's n	ame										ID#			
Host	name (Affiliate)	ne				E-mail	addre	ss														
Street	address						()														
City	Prov.			Postal			Telepl									Signa						
	Return completed test sheet to the Lifes	saving So	ciety Br	anch Of	tice pro	mptly at	ter the	exam. I	Retain (one cop	y for y	our rec	ords. [o not s	end cas	sh by m	ail.					

						H ₂	0 Prof	ficienc	у			First Aid			Recognition & Rescue							
7	LIFESAVING SOCIETY The Lifeguarding Experts Bronze Star (Revised 2014) Side 2: Please print each candidate's name and contact information legibly.	Date of birth	Entries -	N Inflate clothes & huddle 1	Recover submerged viotize	Rescue Drill 1	ന Rescue drill 2	o Object support	2 Fitness medlev - 100 m	∞ Endurance – 400 m in 12 min	Assess pulse & respiration	Adult CPR	Land spinal	52 Victim simulation	ap Victim recognition	ට Hand signal communication	Walk & spot	다-water search	ക Rescue with a partner	12 Rescue non-breathing wint:	Result	
7 Name									,	Ŭ		10		124	120	10	17	10	10			
Address	Postal Code	Year Month																				
E-mail 8 Name Address	Phone	Day Year																				
	Postal Code Phone	Month Day																				
9 Name	FIUIE	Year																				
E-mail	Postal Code Phone	Month Day																				
		Year																				
E-mail	Postal Code Phone	Month Day																				
		Year																				
City E-mail 12	Postal Code Phone	Month Day																				
Name		Year Month																				
City E-mail	Postal Code Phone	Month Day																				
	Check box if there are more candidates on the attributes the state of the page of the pages.	revers	e side	of thi	s pag	ie.	/ - S	atisfac	ctory Pe	erforma	nce	F	· Fail		l Pass Exam				al Fail Exam			
() Host name (Affiliate) Telephone								Exam information Exam is: Original OR Recert ()														
Please complete Instructor, Awards and Payment information see Side 1 of test sheet. Host name, Exam information and Examiner						- 1	This the c	section andid	on to l	name o			the L	ifesav	ving In		ohone etor w	who examined				
sectio					mail address									ID#								
		(Telepl) hone								Signa	ture				_						