



LIFESAVING SOCIETY

The Lifeguarding Experts

Aquatic Master Sheet

- Assistant Instructor
- Swim Instructor
- Lifesaving Instructor
- Advanced Instructor
- First Aid Instructor
- AED Instructor
- Advanced First Aid Instructor
- BOAT Instructor
- Boat Rescue Instructor
- NLS Instructor
- AST Instructor
- Patrol Rider Instructor
- Pool Operator Instructor
- Aq. Safety Inspector Instructor
- Other \_\_\_\_\_
- Coach 1-Pool
- Coach 1-Open Water
- Coach 2
- Coach 3
- Core Instructor Clinic
- Exam Standards Clinic
- Inclusion Clinic
- Instructor Trainer Clinic

Host name (Affiliate) _____ ( ) Telephone _____	Affiliate Contact Person _____ ( ) Telephone _____ ( ) Email _____
Exam date: ____ YY ____ MM ____ DD	<i>All candidates shown as passed have completed all items to the required standard.</i>
Street address _____ City _____ Prov. _____ Postal code _____ ( )	Lifesaving Society Trainer's name _____ ID# _____
Facility name (e.g., name of pool) _____ Telephone _____	E-mail address _____ ( )
Payment information <input type="checkbox"/> Exam fees attached <input type="checkbox"/> Exam fees not attached	Telephone _____ Signature _____

**P - Pass      F - Fail**

TOTAL ENROLLED \_\_\_\_\_ TOTAL PASS \_\_\_\_\_ TOTAL FAIL \_\_\_\_\_

Name/Address/Telephone/Email ( <i>Please print legibly</i> )	Date of Birth YY MM DD	Prerequisites checked	Teaching	Evaluating	Knowledge	Leadership	Safety supervision	Result
<div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 5px;">1</div> <hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/>	/ /							
Lifesaving Society ID # _____	Prerequisite(s): _____		Date earned: _____		Date earned: _____			
<hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/>	Location: _____		Location: _____					
<div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 5px;">2</div> <hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/>	/ /							
Lifesaving Society ID # _____	Prerequisite(s): _____		Date earned: _____		Date earned: _____			
<hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/>	Location: _____		Location: _____					
<div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center; margin-bottom: 5px;">3</div> <hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/>	/ /							
Lifesaving Society ID # _____	Prerequisite(s): _____		Date earned: _____		Date earned: _____			
<hr style="border-top: 1px dotted black;"/> <hr style="border-top: 1px dotted black;"/>	Location: _____		Location: _____					

P - Pass    F - Fail		Date of Birth YY   MM   DD		Prerequisites checked	Teaching	Evaluating	Knowledge	Leadership	Safety supervision	Result
Name/Address/Telephone/Email ( <i>Please print legibly</i> )	/ /									
	Lifesaving Society ID #									
	Prerequisite(s): _____ Date earned: _____      Date earned: _____ Location: _____                      Location: _____									
Name/Address/Telephone/Email ( <i>Please print legibly</i> )	/ /									
	Lifesaving Society ID #									
	Prerequisite(s): _____ Date earned: _____      Date earned: _____ Location: _____                      Location: _____									
Name/Address/Telephone/Email ( <i>Please print legibly</i> )	/ /									
	Lifesaving Society ID #									
	Prerequisite(s): _____ Date earned: _____      Date earned: _____ Location: _____                      Location: _____									
Name/Address/Telephone/Email ( <i>Please print legibly</i> )	/ /									
	Lifesaving Society ID #									
	Prerequisite(s): _____ Date earned: _____      Date earned: _____ Location: _____                      Location: _____									
Name/Address/Telephone/Email ( <i>Please print legibly</i> )	/ /									
	Lifesaving Society ID #									
	Prerequisite(s): _____ Date earned: _____      Date earned: _____ Location: _____                      Location: _____									
Name/Address/Telephone/Email ( <i>Please print legibly</i> )	/ /									
	Lifesaving Society ID #									
	Prerequisite(s): _____ Date earned: _____      Date earned: _____ Location: _____                      Location: _____									