

# Merit Badge Classes



## IMPORTANT INFORMATION:

- **Swimming Merit Badge:** Must pass pre-screen prior to taking course. Takes place first 15 minutes of class.
- **First Aid Merit Badge:** No pretest required.
- **Lifesaving Merit Badge:** Must pass pre-screen prior to taking course. Takes place first 15 minutes of class.
- Earn your merit badge in two class periods from 6:00pm-8:00pm.
- Each merit badge class runs for two consecutive weeks.
- **Must have a minimum of 4 Scouts signed up to run the class.**
- Maximum of 15 scouts per class. Please email Brittany if you have more than 15 scouts.
- Must attend both classes to pass the course.
- Taking the course does **NOT** guarantee you will pass. These classes are strictly skill based.
- Contact Brittany for more information at [btaylor@slco.org](mailto:btaylor@slco.org)

**If you are looking to only pass off rank advancements, contact Courtney (cldavis@slco.org) to make reservations. Available pool space is on Saturdays from 12:30-3:30pm.**

**No other time available.**

<u>Month</u>	<u>Swimming Merit Badge</u>	<u>First Aid Merit Badge</u>	<u>Lifesaving Merit Badge</u>	<u>Reg. Opens</u>	<u>Fee</u>
Oct	3rd & 10th 19th & 26th	4th & 11th 18th & 25th	5th & 12th 17th & 24th	Sept 25	\$20
Nov	7th & 14th	1st & 8th 15th & 29th	9th & 16th 21st & 28th	Oct 25	\$20
Dec	5th & 12th	6th & 13th	7th & 14th	Nov 25	\$20

## J.L. Sorenson Recreation Center



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or [ahaddow@slco.org](mailto:ahaddow@slco.org).



**REGISTER ONLINE!**

Visit [www.recreation.slco.org/jlsorenson](http://www.recreation.slco.org/jlsorenson)

# Merit Badge Classes

## Circle Merit Badge Date

<u>Swimming</u>	<u>First Aid</u>	<u>Lifesaving</u>
Oct 3rd & 10th	Oct 4th & 11th	Oct 5th & 12th
Oct 19th & 26th	Oct 18th & 25th	Oct 17th & 24th
Nov 7th & 14th	Nov 8th & 15th	Nov 9th & 16th
Dec 5th & 12th	Nov 22nd & 29th	Nov 21st & 28th
	Dec 6th & 13th	Dec 7th & 14th



Check here to be contacted about inclusion opportunities for people with disabilities.

6th & 13th

### **Aquatics Registration Form:**

Participant Name: \_\_\_\_\_ GENDER: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

AGE: \_\_\_\_\_ Email (REQUIRED) \_\_\_\_\_

Address: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ WORK: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY CONTACT PHONE: \_\_\_\_\_

### **Youth Sports Registration Statement Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy**

- Assumption of Risk:** I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.
- Release:** In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.
- Indemnification:** In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.
- Refund:** Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.
- Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.
- Emergency Treatment:** I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.
- Media Consent:** I hereby grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.
- Name Posting:** Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website

By signing the assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its content and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: \_\_\_\_\_ Signature (Parent or Legal Guardian): \_\_\_\_\_ Date \_\_\_\_\_



OFFICE USE ONLY.....Receipt

#:

Amt.:

Date: