



LIFESAVING SOCIETY
The Lifeguarding Experts

Community Official

(Revised 2024)

Side 1: Please record each candidate's name and contact information accurately.

	The Lifesaving Society	Lifesaving Sport Overview	Expectations and Responsibilities	Lifesaving Sport Safety	Timer	Runner	Equipment Crew	Marshall	Announcer	Tabulator – Emergency Response	Recorder – Open Water	Result
	1	2	3	4	5a	5b	5c	5d	5e	5f	5g	
1 Name _____ D.O.B. (YY/MM/DD) _____ Phone _____ Address _____ Province _____ City _____ Postal Code _____ Email _____												
2 Name _____ D.O.B. (YY/MM/DD) _____ Phone _____ Address _____ Province _____ City _____ Postal Code _____ Email _____												
3 Name _____ D.O.B. (YY/MM/DD) _____ Phone _____ Address _____ Province _____ City _____ Postal Code _____ Email _____												
4 Name _____ D.O.B. (YY/MM/DD) _____ Phone _____ Address _____ Province _____ City _____ Postal Code _____ Email _____												

Check box if there are more candidates on the reverse side of this page.
This test sheet is page _____ of _____ page(s).

– Satisfactory Performance
 – Fail

Total Pass for Exam Total Fail for Exam

Payment Information Exam fees attached Exam fees not attached
Send invoice or receipt to:

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Street address _____
City _____ Prov. _____ Postal Code _____

Instructor Information

Instructor's name _____ ID# _____
E-mail address _____
Telephone _____ Signature _____

Awards Information Awards issued by affiliate Awards not issued

This section to be completed by the Officials Instructor who examined the candidates. Same as instructor or

Exam Information Exam is: Original OR Recert

Exam Date: _____
YY MM DD

Facility name (e.g. name of pool) _____ Telephone _____

Examiner's name _____ ID# _____
E-mail address _____
Telephone _____ Signature _____



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Side 2: Please record each candidate's name and contact information accurately.

<div style="display: flex; flex-direction: column; align-items: center;"> <p>LIFESAVING SOCIETY The Lifeguarding Experts</p> <h2>Community Official</h2> <p>(Revised 2024)</p> <p>Side 2: Please record each candidate's name and contact information accurately.</p> </div>	The Lifesaving Society	Lifesaving Sport Overview	Expectations and Responsibilities	Lifesaving Sport Safety	Timer	Runner	Equipment Crew	Marshall	Announcer	Tabulator – Emergency Response	Recorder – Open Water	Result
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This test sheet is page _____ of _____ page(s).

– Satisfactory Performance
 – Fail

Total Pass for Exam Total Fail for Exam

<p>Please complete all sections on Side 1 of test sheet. Host, exam information <i>and</i> examiner sections <i>must</i> be completed on both sides 1 and 2 of the sheet.</p>	
<p>Invoicing Information</p> <p>_____</p> <p>Host name (Affiliate or Organization paying the exam fees)</p>	<p>This section is to be completed by the Officials Instructor who examined the candidates.</p> <p><input type="checkbox"/> Same as instructor or</p> <p>_____</p> <p>Examiner's name ID#</p> <p>_____</p> <p>E-mail address</p> <p>()</p> <p>_____</p> <p>Telephone Signature</p>
<p>Exam Information Exam is: <input type="checkbox"/> Original OR <input type="checkbox"/> Recert</p> <p>Exam Date: _____</p> <p style="text-align: center;">YY MM DD</p> <p>_____</p> <p>Facility name (e.g. name of pool) Telephone</p>	

Return completed test sheet to the Lifesaving Society Branch Office promptly after the exam. **Retain one copy for your records.** Do not send cash by mail.