COMMUNITY ROWING INC.
SWIM TEST FORM

Instructions:
1. Write Name of Participant on the Swim Test Card;
2. Have a certified Lifeguard/Water Safety Instructor observe you and complete form below;
3. Make a copy of your card for your records;
4. Bring this form to the boathouse on the first day of program; or mail a copy to:
   Community Rowing
   20 Nonantum Road
   Brighton, MA 02135

Name of Participant/Rower: ________________________________

Name of Lifeguard/Water Safety Instructor: ____________________

Name of Pool: ________________________________

Phone Number of Pool: ________________________________

Swim Test Certification:
I hereby certify that the participant can swim 100 yards in a competent manner and can remain afloat for at least 5 minutes.

Signature of Lifeguard/Water Safety Instructor: ____________________

Date of Test: ____________________

Keep a copy of the completed swim test for your records.

Revised 3/12/14