



**Longfellow Natick**  
**American Red Cross Lifeguard Training Courses**  
**Instructor: Jonathan Sugarman, [jsugarman.lhc@gmail.com](mailto:jsugarman.lhc@gmail.com)**  
**Summer 2026 Courses**  
**Registration Located on the Final Page**



**Full Certification Course (Must attend all in-person class sessions)**

**Course Overview:**

- Course Duration: 3 days
- Course Description: This intensive course certifies first-time lifeguards in American Red Cross Lifeguarding.
- Blended Learning: Online learning materials must be completed prior to attending in-person sessions.

**In-Person Class Dates & Times:**

**June Course**  
 June 12- 4:30PM-8:30PM  
 June 13- 9:00AM - 7:30PM  
 June 14- 9:00AM - 7:30PM

**July Course**  
 July 24- 4:30PM-8:30PM  
 July 25- 9:00AM - 7:30PM  
 July 26- 9:00AM - 7:30PM

**August Course**  
 Aug 14- 4:30PM-8:30PM  
 Aug 15- 9:00AM - 7:30PM  
 Aug 16- 9:00AM - 7:30PM

**Location:** Longfellow Natick Health Club, 203 Oak St, Natick, MA 01760

**Cost:** Members: \$350.00 Non-Members: \$400.00

**Eligibility Requirements:**

- Eligible participants must be 15 years old or older, able to swim 300 yards continuously, and retrieve a 10-pound brick from 10 feet of water.
- This pre-test will be conducted on the first day of class

**Recertification Course (must attend all in person class sessions)**

**Course Overview:**

- Course Duration: 1 day
- Course Description: A refresher course to review and refresh the skills learned in the initial certification.

**In-Person Class Dates & Times:**

- Sunday, June 28 - 8:00AM - 7:00PM

**Location:** Longfellow Natick Health Club, 203 Oak St, Natick, MA 01760

**Cost:** Members: \$175 Non-Members: \$200

**Eligibility Requirements:**

- Must have an active American Red Cross Lifeguarding Certification, or one expired within the last 30 days, **proof of this certification is required prior to the start of class.**

**Please email this registration and any questions to our course instructor,  
 Jonathan Sugarman at [jsugarman.lhc@gmail.com](mailto:jsugarman.lhc@gmail.com)**

## Course Registration

Participant Name: \_\_\_\_\_ Participant Phone: \_\_\_\_\_

Participant Email: \_\_\_\_\_

Parent Email (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

## Payment (processed one week before the course, no refunds)

**Payment Method:**  Cash  Check  Credit Card

**Certification Type:**  New Certification  Recertification

**If New Certification, Course Dates:** \_\_\_\_\_

Amount: \_\_\_\_\_ (prices located above)

CC# \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## Waiver:

***The following waiver must be signed by all participants, or by a parent if the participant is under 18.***

*I accept full responsibility for my (or my child's) participation in the Longfellow Health Club class and for my (or my child's) use of any and all equipment, facilities, or services owned and operated by Longfellow Health Club. No refunds will be issued once the class has started. Refunds will not be provided for any reason without 24-hour advanced notice. Requests accompanied by a doctor's note due to illness will be eligible for a makeup class. It is understood and agreed that any claims for accidents or illness will be covered by the participant's or parent's insurance. Longfellow Health Club assumes no responsibility for illness or accidents. We also reserve the right to dismiss any participant whose behavior is disruptive to the program or threatens the safety of others.*

Participant Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Jonathan Sugarman at [jsugarman.lhc@gmail.com](mailto:jsugarman.lhc@gmail.com)**