



SWIM TEST FORM

Instructions:

- 1) Write Name of Participant on the Swim Test Form;
- 2) Have a certified Lifeguard/Water Safety Instructor observe you and complete for below
- 3) Return to BRI registrar with other paperwork at registrar@boonerowing.com

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 float or tread water (or any combination of the two) for at least 10 minutes.

Signature of Lifeguard/Water Safety Instructor: _____

Date of Test: _____

PARENT/GUARDIAN:

In lieu of a Swim Test Certification, you as the parent/guardian can sign below to indicate your child can swim 100 yards and tread water for at least 10 minutes.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Make appointments for swim tests at Wadeview Pool 2177 South Summerlin Avenue, Orlando, FL 32806 [407.246.4092](tel:407.246.4092) or check with your Local YMCA.