



LIFESAVING SOCIETY
The Lifeguarding Experts

Bronze Cross (Revised 2003)

Side 2: Please **print** each candidate's name, and contact information legibly.

Date of birth

Prerequisites checked	Rescue drill	Fitness challenge	Endurance challenge	First aid assessment	One-rescuer CPR	Two-rescuer CPR	Obstructed airway: conscious adult or child	Obstructed airway: conscious infant	Obstructed airway: unconscious victim	Hypothermia	Walk, spot & evaluate	Spinal injury management	Team search	Rescue 1: multiple victims	Rescue 2: submerged victim	Rescue 3: two rescuers	Rescue 4: injured victim	Result
*1	*2	*3	*4	*5	*6	*7a	*7b	*7c	*8	*9	10	*11	12	13	*14	15		

* Items are instructor evaluated

7																			
Name.....			Year																
Address.....																			
City..... Postal Code.....			Month	Prerequisites:															
E-mail..... Phone.....			Day	Original: Bronze Medallion Date earned: _____ Location: _____															
				Recert: Bronze Cross Date earned: _____ Location: _____															
8																			
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This test sheet is Page _____ of _____ Pages.

- Satisfactory Performance **F** - Fail

Total Pass for Exam

Total Fail for Exam

Host name (Affiliate) _____ Telephone _____

Please complete Instructor, Awards and Payment information sections on Side 1 of test sheet. Host name, Exam information and Examiner sections must be completed on both sides 1 and 2 of the test sheet.

Exam information

Exam date: _____ Exam is: Original **OR** Recert

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

This section to be completed by the Lifesaving Examiner who examined the candidates.

Examiner's name _____ ID# _____

E-mail address _____

Telephone _____ Signature _____