



LIFESAVING SOCIETY  
The Lifeguarding Experts

# Bronze Cross

(Revised 2020)

*This test sheet for original exam candidates only.*

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

Date of birth

Prerequisites checked

1*	2*	3*	4*	5*	6*	7*	8*	9*	10*	11*	12*	13*	14*	15	16	17
The Lifesaving Society	Non-fatal drowning	Shallow water blackout	Assistant lifeguard roles and responsibilities	Communication	Two-rescuer removals	Surface dives and underwater swims	Team search	Two-rescuer drowning resuscitation	Spinal injury management	Object recovery and transport	Rescue drill: recover submerged victim	Endurance challenge – 400 m or yd.	Safety supervision scanning	Two-person rescue 1: multiple victims	Two-person rescue 2: submerged victim	Assistant lifeguard situations

Result

\* Items are instructor evaluated

<b>1</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion					Date earned:					Location:				
<b>2</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion					Date earned:					Location:				
<b>3</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion					Date earned:					Location:				
<b>4</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion					Date earned:					Location:				
<b>5</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion					Date earned:					Location:				
<b>6</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion					Date earned:					Location:				

Check box if there are more candidates on the reverse side of this page.  - Satisfactory Performance  - Fail Total Pass for Exam  Total Fail for Exam

This test sheet is Page \_\_\_\_\_ of \_\_\_\_\_ Pages.

<b>Invoicing Information</b> Host name (Affiliate or Organization paying the exam fees) Telephone ( ) Street address City Prov. Postal code	<b>Instructor Information</b> Instructor's name ID# E-mail address ( ) Telephone Signature	
	<b>Individual who examined the candidates</b> Same as Instructor <input type="checkbox"/> or Examiner's name ID# E-mail address ( ) Telephone Signature	
	<b>Individual who apprenticed on the exam</b> Same as Instructor <input type="checkbox"/> or Apprentice's name ID#	
<b>Exam Information</b> Exam date: YY MM DD Facility name (e.g., name of pool) Telephone ( )		



LIFESAVING SOCIETY  
The Lifeguarding Experts

# Bronze Cross

(Revised 2020)

*This test sheet for original exam candidates only.*

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

Date of birth

Prerequisites checked

1*	2*	3*	4*	5*	6*	7*	8*	9*	10*	11*	12*	13*	14*	15	16	17
The Lifesaving Society	Non-fatal drowning	Shallow water blackout	Assistant lifeguard roles and responsibilities	Communication	Two-rescuer removals	Surface dives and underwater swims	Team search	Two-rescuer drowning resuscitation	Spinal injury management	Object recovery and transport	Rescue drill: recover submerged victim	Endurance challenge - 400 m or yd.	Safety supervision scanning	Two-person rescue 1: multiple victims	Two-person rescue 2: submerged victim	Assistant lifeguard situations

Result

\* Items are instructor evaluated

<b>7</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	
<b>8</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	
<b>9</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	
<b>10</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	
<b>11</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	
<b>12</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	
<b>13</b> Name..... Address..... City..... Postal Code..... E-mail..... Phone.....	Year															
	Month	Prerequisites:														
	Day	Bronze Medallion	Date earned:												Location:	

Check box if there are more candidates on the reverse side of this page. This is Page      of      Pages.  - Satisfactory Performance  - Fail Total Pass for Exam      Total Fail for Exam     

Please complete all sections on Side 1 of test sheet. Host, exam information and examiner sections must be completed on both sides 1 and 2 of the test sheet.

<b>Invoicing Information</b>  Host name (Affiliate or Organization paying the exam fees) _____	<b>Individual who examined the candidates</b> Same as Side 1 <input type="checkbox"/> (sign below) or  Examiner's name _____ ID# _____  E-mail address _____ ( ) _____ Telephone _____ Signature _____
<b>Exam Information</b> Exam date: <u>    </u> YY <u>    </u> MM <u>    </u> DD	