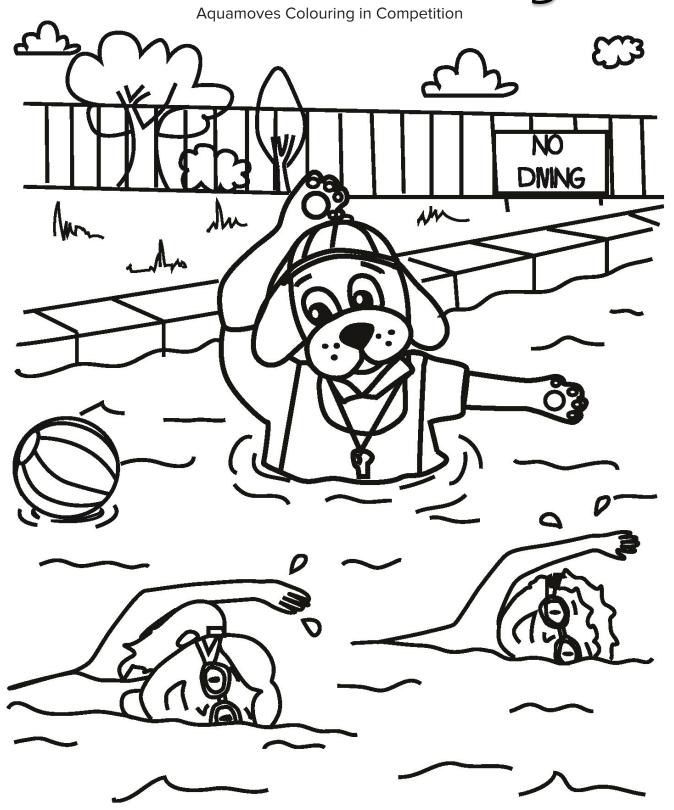
Name:	Δαe.
Name.	Age

## Water Safety











Name: \_\_\_\_\_\_ Phone: \_\_\_\_\_ Age: \_\_\_\_\_