

NEW Lifeguard Application for Millview Swim Club

Name: _____

Date: _____ Date of Birth: _____

Phone Number: _____

Email address: _____

Social Security # (for tax purposes): _____

Address: _____

Emergency Contact (name, relationship to you, and number): _____

Previous Lifeguarding Experience or other Work Experience? _____

How many hours would you like to work per week? _____

List 3 qualities that would make you a good lifeguard: _____

Please list any days or times you are unavailable to work from May 25 through

September: _____

If applicable, list any additional jobs you are planning to work this summer: _____

Have you certified as a lifeguard yet? _____ *Note: We are planning to have a class in April or May, hopefully in an indoor pool.

References (name, relationship to you, and contact email & phone):

1. _____

2. _____

3. _____

Please email application to millviewlifeguard@gmail.com.