## Treehaven Swim Club 2021 Lifeguard Application

*Full Name:			
*Address:			
*Cell Phone: _		Email:	
*Home Phone:	:	Birth Date:	
*Emergency Co	ontact Name/Phone:		
*Social Securit	y #:		
*Education (Ye	ears Completed): High School	College	
Previously wor	ked at Treehaven or another pool? Plea	ase list where	·····
How many Sea	isons have you worked as a lifeguard? _	What year did you start?	·
You will be add	ded to Remind applications for communi	ications, are you ok with this? Y/N	
You will get a 1	1099 for tax purposes, please note that y	you are ok with this: Y/N	
*If you are und	der 18, your parents are required to sign	application below and attend initial meeting v	vith you.
	ions - Courses & Dates ( <u>Enclose a copy o</u> nclubstaff@gmail.com or the mailing ad		
All cards will be schedule – <b>NO</b>	, , ,	the lifeguard room if you are hired <u>before you</u>	are put on the
*3 References:	: (Please include Names, Addresses, & Te	elephone Numbers)	
If under 18:	Parent/Guardian Printed Name	Parent/Guardian Signature	Date

Mailing Address: Kirsten Gregory

ATTN: LIFEGUARD APPLICATION

2601 Kane Road, Aliquippa, PA 15001 OR Email Address: treehavenstaff@gmail.com

<sup>\*</sup>Once you have completed Job Application please send this and the 1099 form to: