Athlete's Age _____ as of July 1, 2019



JONES BEACH JUNIOR LIFEGUARD PROGRAM

Tryout Date: Thursday, May 30, 2019			
Athlete's Last Name:			
Athlete's First Name:			
GENDER: Male F	emale		
BIRTHDAY: Month	_/ Day	_/ Year 20	
E-MAIL ADDRESS:			
CELL PHONE#			

PAID amount and			
check #			
STAMP			
TIME			
Lifeguard's Name			