

Lifeguard Application for Millview Swim Club

Name: _____ Date: _____

Date of Birth: _____

Address: _____

Phone Number: _____

Email address: _____

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

Previous Lifeguarding Experience or other Work Experience? _____

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

1. _____

2. _____

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

Please email application to shanwhitehead72@gmail.com

or text a photo to 615-828-3224.