



**2022 Treehaven Staff Requirement  
Acknowledgement of 1099 by staff (parent/guardian if under 18)**

Staff Member \_\_\_\_\_  
Position(s) \_\_\_\_\_  
Social Security Number \_\_\_\_\_ used for 1099  
Birthdate \_\_\_\_\_ used for 1099  
Address \_\_\_\_\_ used for 1099

I acknowledge that I understand that I will be getting a 1099 to file with taxes at the end of the season for pay received from Treehaven Swimming Club during the 2022 Swim Season. This is a requirement to be put on the schedule.

Signature of Staff Member \_\_\_\_\_  
Parent/Guardian Printed Name \_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_  
Date: \_\_\_\_\_

**Please send in with Lifeguard Application to:**

**Treehaven Swim Club  
C/O Treehaven Lifeguards  
PO BOX 1133  
Aliquippa, PA 15001**