

Treehaven Swim Club
2022 Lifeguard Application

Full Name: _____

Address: _____

Cell Phone: _____ Email: _____

Home Phone: _____ Birth Date: _____

Emergency Contact Name/Phone: _____

Social Security #: _____

Education (Years Completed): High School _____ College _____

Previously worked at Treehaven or another pool? Please list where _____

How many Seasons have you worked as a lifeguard? _____ What year did you start? _____

You will be added to Remind applications for communications, are you ok with this? Y/N

You will get a 1099 for tax purposes, please note that you are ok with this: Y/N

*If you are under 18, your parents are required to sign application below, and attend initial meeting with you.

*List Certifications - Courses & Dates (Enclose a copy of all cards and certifications to the mailing address below.)

All cards will be required to be printed and hanging in the lifeguard room if you are hired before you are put on the schedule – NO EXCEPTIONS

*3 References: (Please include Names, Addresses, & Telephone Numbers)

If under 18: _____ Date _____
Parent/Guardian Printed Name Parent/Guardian Signature

*Once you have completed Job Application please **send this and the 1099** form to:

Mailing Address:

Treehaven Swim Club
ATTN: LIFEGUARD APPLICATION
PO BOX 1133, Aliquippa, PA 15001