

# Lifeguard Application

Harleysville Community Center

You Must have an up to date lifeguarding certification in order to apply

Where and when did you get your certification?

Place \_\_\_\_\_ Date \_\_\_\_\_

Please fill in following:

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Address \_\_\_\_\_

How many hours a week would you like to work?

10      15      20      25      30

Do you want to work as a substitute?

Yes \_\_\_\_\_ No \_\_\_\_\_

Do you want to do swimming lessons?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you on the Swim Team?

Yes \_\_\_\_\_ No \_\_\_\_\_

What days or nights would you like to have off?

Do you have another job and how will it interfere with lifeguarding?

Please explain

Please list any known vacations or days off you need?

Are you going to college this coming fall?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are you playing any fall sports?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes what kind or sport?

Cross Country    Waterpolo    Tennis    Soccer    Football (circle)

Mail Completed form to:

MRS Martin - 870 Church Road - Harleysville, Pa 19438