Wexford Leas Swim Club

Lifeguard/Pool Staff Seasonal Job Application

PLEASE PRINT Application Date: _____

Name: _____

Permanent Address: _____

Home Phone Number _____ Cell Phone Number: _____

Email Address: _____

Date of Birth: _____ Current Age: _____

LIFEGUARD INFORMATION – PLEASE ATTACH PHOTOCOPIES OF YOUR CURRENT CERTIFCATIONS (even if you have worked for us before).

C.P.R. Certificate (Date Received): _____ Copy Attached: _____

First Aid Certificate (Date Received): _____ Copy Attached: _____

SUMMER AVAILABILITY

	FROM (MM/DD/YY)	**TO (MM/DD/YY)**
Dates you are available to work this summer:	_____	_____

Any dates (vacation, college orientation, or other) you are NOT available to work this summer:

_____

Lifeguard/Supervisor Experience:

Location	Type of Experience	Years

Other Certifications/Awards/Hobbies or Interests:

_____

_____

Signature: _____ Date: _____

PLEASE RETURN COMPLETED FORM TO:

Jackie McComb
30 Highgate Lane
Cherry Hill, NJ 08003
president@wexfordleasswimclub.org