

Lake Wallkill Community, Inc.

Application for Lifeguard

Name: _____

Home address: _____

Home Phone: _____

Lake Address: _____

Email: _____

Cell Phone: _____

Date of Birth: _____

You need the following Certifications to work:

- Lifeguarding with CPR/AED Yes___ No___ Expiration_____
- First Aid Yes___ No___ Expiration_____
- Waterfront Skills Yes___ No___ Expiration_____

If any answered 'No', will you be certified prior to June 25th? _____

I am interested in: Full-time ___ Part-time ___ Either ___

Previous Experience:

Availability:

I can begin work on: _____

I return to school or must stop work by: _____

I have reviewed the job description and can meet the requirements of the position: Yes _____ Cannot meet: _____

Signature: _____ Date: _____