

**The Ricky Taylor Memorial Community Swimming Pool
2021 Lifeguard Application**

Full Name: _____ Date of Birth: _____

Address: _____

Phone Number: _____ Email Address: _____

School: _____ Grade: _____

Parents Name: _____ Phone Number: _____

Lifeguard Certification: Yes _____ No _____ Expiration Date: _____

CPR Certification: Yes _____ No _____ Expiration Date: _____

Available Start Date: _____ Number of Weekly Hours Requested: _____

Scheduling Conflicts or other available times to work: _____

The above information is correct to the best of my knowledge.

Applicants Signature: _____ Date: _____

Parents Signature: _____ Date: _____

I understand that by applying for and accepting a job as a lightguard for the Ricky Taylor Memorial Community Swimming Pool:

I am agreeing to perform a job that includes protecting the lives and safety of both the children and adults that come to enjoy the pool. I understand that when I am on duty, I will be responsible for supervising swimmers, minimizing dangers, educating facility users about safety, enforcing rules and regulations, providing assistance and if necessary, performing rescues. I understand the importance of my duties as a certified lifeguard to protect and ensure safety.

I understand that my job will also include keeping facilities clean at all times. This may include, but is not limited to, trash removing, bathroom cleaning and pool area cleanup.

I understand that by accepting this job, I am committing to the full summer season of Memorial Day to Labor Day.

I understand that the Ricky Taylor Memorial Community Swimming Pool is a drug free facility and agree to be drug test if asked at any time by management.

Signature: _____

Date: _____

Parents Signature: _____

Date: _____

Office Use Only

Date Received: _____

Hired: Yes _____

No _____

Signature of Pool Manager: _____

Date: _____

Please send all applications to:

Pool Manager

PO Box 211

Deltaville, VA 23043