

TOWN OF SOUTH BETHANY
Lifeguard Application 2016

NAME: _____ S.S. #: _____

Check if you are under 16 years of age. (Requires a work permit.)

ADDRESS:

Home: _____
_____ Phone #: _____

Summer: _____
_____ Phone #: _____

College: _____
_____ Phone #: _____

EXPERIENCE:

Pool: _____ Ocean: _____

QUALIFICATIONS/TRAINING:

Red Cross Courses Passed:

First Aid: _____ C.P.R.: _____ AED: _____

Water Safety Instructor: _____ Lifeguarding: _____ (Certification Expires: _____)

List Previous Employment Experience:

REMARKS: Please write a brief paragraph as to why you should be employed as a South Bethany Lifeguard:

Return Application To: Town of South Bethany
402 Evergreen Road
South Bethany, DE 19930
Email: townhall@southbethany.org