



**2021 Season Application**

**General Information**

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_  
Address: \_\_\_\_\_ Email: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ DOB: \_\_\_\_\_

Are you a member of Madrona Swim Club? \_\_\_\_\_

**Positions Applying For** (check all that apply)

*\*\* All lifeguards and swim instructors must be lifeguard certified \*\**

- Pool Manager
- Lifeguard
- Swim Lesson Instructor
- Swim Team Coach

**Emergency Contact Information**

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Work #: \_\_\_\_\_

**References**

Please list two references not related to you that are familiar with your character and work ethic (i.e. teachers, coaches, previous employers)

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Work Experience**

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_  
Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

What age groups do you have experiences with?  
(i.e. babysitting, volunteering, work)

3-5      6-8      9-11

**Lifeguard Availability**

**Beginning of Summer** (choose one)

\_\_\_\_\_ I am available BEFORE summer break  
5/28-6/17 afternoons and evenings

\_\_\_\_\_ I am only available AFTER school is out

**End of Summer** (choose one)

\_\_\_\_\_ I am only available UNTIL school starts

\_\_\_\_\_ I am available AFTER school starts  
9/7-9/14 afternoons and evenings

**Swim Lesson Availability**

Only select sessions you can commit fully to

Time off will NOT be granted during lesson sessions

- \_\_\_\_\_ Session 1 21 Jun - 02 July
- \_\_\_\_\_ Session 2 05 July - 16 July
- \_\_\_\_\_ Session 3 19 July - 20 July
- \_\_\_\_\_ Session 4 02 Aug - 13 Aug
- \_\_\_\_\_ Session 5 16 Aug - 27 Aug

**Time off request**

Please list any known vacation dates you would like to be considered. These dates are not guaranteed until staffing is finalized. If hired, you will still need to fill out a time request form to be approved.

**Parent/Guardian signature for time off requests** (minors only)

I have reviewed my child's requested time off dates and their commitment to work the above lesson schedules. ***I understand that time off will not be granted for lesson sessions for which they are hired.***

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Certifications**

Please include copies of each certification

**Lifeguard**

Certifying agency: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**CPR**

Certifying agency: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**First Aid**

Certifying agency: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**Other**

Certifying agency: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

\*\*If you have not completed any of the above certificates, please list any classes you are signed up for and the anticipated completion date:\*\*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





**Acknowledgements** Please read carefully and initial at the bottom

- \* I acknowledge that my employment with Madrona Swim Club will be 'at-will' and that either Madrona Swim Club or I reserve the right to terminate employment at any time, with or without cause.
- \* I understand that Madrona Swim Club is open 7 days a week including holidays. I agree to work my scheduled hours, including those that fall on holidays, once the schedule is posted unless a time off request or prior shift replacement has been approved by the Manager in writing.
- \* I authorize Madrona Swim Club to contact previous employers regarding my previous employment. I also authorize Madrona Swim Club to release information regarding my job performance to a prospective employer, unless otherwise stated.

I agree to the above acknowledgements: \_\_\_\_\_ (*initial*)

**Agreement** I hereby affirm that the information I have given in this application is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

This year we will be holding mandatory swim lesson and job training one day in the week of May 24th. Please make sure you are able to attend this before submitting your application.

Completed applications :

**mail to:**

PO Box 3153  
Salem, OR 97302

**or email to:**

secretary@madronaswimclub.com