

Strasburg Swimming and Recreation Association
South Jackson Street
P.O. Box 59
Strasburg, PA 17579-0059



LIFE-GUARD SUMMER SEASON 20__
(Please print clearly)

Today's Date: _____

Full Name: _____

Position of Employment (Circle all that apply):

Manager Assistant MGR/Head Lifeguard Lifeguard

Date of Birth: ____/____/____

Home Ph #: (____) _____ Mobile Ph #: (____) _____

eMail Address: _____

Permanent Address: _____

Lifeguard Information (ATTACH PHOTOCOPIES OF YOUR CURRENT CERTIFICATIONS)

C.P.R. Certificate (date received): _____ Copy Attached: _____

Lifeguard Training Cert. (date received): _____ Copy Attached: _____

First Aid Certificate (date received): _____ Copy Attached: _____

Swim Suit Size:

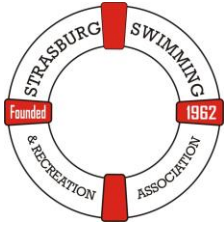
Men's Waist Size:

Women's Suit Size: _____

T-Shirt Size (circle one): S M L XL

Sweatshirt Size (circle one): S M L XL

(Application continued)



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Highest level of Education obtained:

Lifeguard Experience/Supervisor Experience:

Certifications/Awards/Hobbies (Interests):

References (name, phone number and relationship, 2-3):

Date available to start: _____

Please mail this completed form and photocopies to:
SSRA - Attn: Hiring Manager
PO Box 59
Strasburg, PA 17579

eMail: Strasburg.Pool@Gmail.com 'LIKE' US on FACEBOOK and add @StrasburgPool to your Twitter too
717.687.9180 (During Business Hours) 717.983.8432 (Off-Season & After Hours)