West Midland Family Center

Junior Lifeguard Application

*Applicants Name:*_____

*Parents Names:*_____

*Address:*_____

*City, State, Zip:*_____

*Phone Number:*_____ *Cell Phone Number:*_____-_____

Email Address: _____

*Grade Completed:*_____ *Age:*_____ *School:*_____

*Birth Date:*_____

Why do you want to participate in the Junior Lifeguard Program?

_____

Do you consider yourself a leader, and why?

_____

What experiences have you had working with children? (What ages?)

_____

Why should children look up to you and what kind of role model do you consider yourself to be?

_____

Do you prefer to spend time with children one on one, or in a small group?

_____

Who do you consider to be your best role model in your life and why?

_____

7. *Are there any days, dates, times, weeks, that you are not available to attend the program?*

_____

8. *Are you willing to commit to 100% participation in all Junior Lifeguard activities?*

_____

****Please return to Renee Allen at the West Midland Family Center by May 20th of the current year. Interviews will begin shortly after May 20th and applicants will be notified if they are accepted into the program by June 10th. Thanks!*

Junior Lifeguard applicants must be at least 13 years old by the start of the program.