



# Margate City Beach Patrol 2018 Lifeguard Tryout



**CHIEF**  
GREG SMALLWOOD

**CAPTAIN**  
MIKE CINCOTTA

**LIEUTENANTS**

MIKE BOOTH    CHUCK GOWDY    CHRIS GRAVES    CHUCK LABARRE    JOHN TOLAND

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**Purpose:**        The Margate Beach Patrol will conduct the annual lifeguard tryouts for the purpose of compiling a prioritized list of candidates for open positions for the 2018 Season.

**Participation:**

- Participants should understand that attaining a qualifying score in a previous year does not place an individual on this year’s list or any future year’s list.
- Participation is entirely voluntary.

**Age Requirements:**    All Candidates must be 16 Years of Age prior to August 1, 2018.

**When:**            Saturday, June 9, 2018  
8: 30 AM Start

**Where:**          Beach Patrol Headquarters  
Decatur Ave. & the Beach  
(609) 822-2370

**Applications:** All completed applications must be turned into City Hall by 3:00 PM Friday, June 8, 2018. *NO application will be accepted after 3:00 PM Friday, June 8, 2018.* Completed applications must include a doctor’s note and waiver. Failure to do so will result in candidate not being eligible to take the lifeguard test.

**Test Components:**    1-Mile Run (must be less than 7 minutes 30 seconds to continue to the other 3 events)  
¼ Mile Row  
Interview  
¼ Mile Swim  
Surf Dash

**List of Candidates:**    A prioritized list of candidates will be posted at Beach Patrol Headquarters no later than Monday, June 11, 2018.

For information on practice sessions prior to test, please call Beach Patrol Headquarters 822-2370.

**MARGATE CITY BEACH PATROL  
APPLICATION FOR LIFEGUARD  
JUNE 9, 2018**

**RETURN TO: CHIEF SMALLWOOD  
MARGATE CITY HALL  
9001 WINCHESTER AVE.  
MARGATE CITY, NJ 08402**

**A PHYSICIAN'S NOTE IS REQUIRED  
SIGNED WAIVER REQUIRED**

NAME \_\_\_\_\_ SOCIAL SEC. # \_\_\_\_\_

EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

AGE \_\_\_\_\_ DOB \_\_\_\_\_ Applicants must be 16 years of age by August 1, 2018

**PREVIOUS WORK EXPERIENCE (LIST MOST RECENT FIRST)**

**EMPLOYER** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**EMPLOYER** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**REFERENCES**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE** \_\_\_\_\_

# AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY CITY OF MARGATE

In consideration, of being allowed to participate in: For Lifeguard Test and Practice  
within The City of Margate and related events and activities, the undersigned:

- 1) Agrees that prior to participating, the undersigned will inspect the facilities and equipment to be used, and if the undersigned believes anything is unsafe, they will immediately advise their instructor or beach supervisor of such condition (s) and refuse to participate.
- 2) Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and social and economic losses which might result from their own actions, inactions or negligence of others, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
- 3) Agrees to assume all the foregoing risks and accept personal responsibility for damages following such injury, permanent disability or death.
- 4) Agrees to release, waive, discharge and covenant not to sue the City of Margate nor the Margate City Beach Patrol, their respective administrators, directors, agents, instructors, and other employees of the organizations, other participants, and if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees," from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.

The Undersigned has read the above waiver and release, understands that he/she has given up substantial rights by signing it and signs it voluntarily.

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*Child's Printed Name (First & Last)*

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*Signature of Parent/Guardian*

*Date*

Relationship of to Above Child?

Parent

Guardian

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Street Address

City

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State

Zip Code