



The Waegwoltic Club
 6549 CoburgRd.
 Halifax, NS B3H2A6
 email: david@waegwoltic.ca

Waegwoltic General Application

Name: _____
 Telephone: _____
 E-mail Address: _____

Availability/unavailability between May 1st – Oct. 31st _____

Please indicate the area of employment interest below.

_____ Aquatics _____ Tennis _____ Sailing _____ Summer Camps
 _____ Recreation _____ Cleaning _____ Other _____
 (please specify)

Tennis Applicants Only - TENNIS LEVEL CERTIFICATION COMPLETED (Tennis Canada):

Instructor	_____	date of completion	_____
Club Pro 1	_____	date of completion	_____
Coach 2 / Club Pro 2	_____	date of completion	_____
Coach 3 / Club Pro 3	_____	date of completion	_____
Coach	_____	date of completion	_____

Aquatics Applicants Only - AQUATICS CERTIFICATIONS COMPLETED: (Please include proof of certification)

	Certification Date	Expiry Date
NLS	_____	_____
WSI	_____	_____
LSI	_____	_____
SFA/CPR-C	_____	_____
Oxygen	_____	_____
AED	_____	_____
Other (please specify):	_____	_____

Sailing Applicants Only - SAILING CERTIFICATION COMPLETED:

Fundamental Course	date of completion	_____
CANSail 1-2	date of completion	_____
CanSail 3-4	date of completion	_____
CanSail 5-6	date of completion	_____

If you have other certification, please specify: _____

PLEASE INCLUDE A RÉSUMÉ WITH YOUR APPLICATION FORM.