



Established October 1907 ABN 74 781 063 539  
PO Box 6006 Malabar NSW 2036 E: admin@surflifesavingsydney.com.au P: (02) 9019 0722 F: (02) 9019 0720  
www.surflifesavingsydney.com.au

## **MEMO**

**To :** Clubs, Presidents, Secretaries, Captains, Chief Training Officers,  
BOL Assessors

**From :** George Shales, Director of Administration

**CC :** SLSS Management, BoL Management,

**Date :** 28<sup>th</sup> February 2014

**Subject :** Position Vacant – EOI's Sought – SLSS Director of Lifesaving 2013-2014

Further to advice to Clubs recently of the resignation of Glen Clarke from the position of Director of Lifesaving, which was accepted with regret by the Branch, expressions of interest are sought from members interested in taking on this position till the end of season.

**EOI's close Friday 14<sup>th</sup> March 2014** at Branch Office on the form provided. The EOI's received will be then presented to the BOL/SLSS Management meetings March 2014.

I look forward to your assistance in this regard.

Regards

**George Shales**  
**DIRECTOR OF ADMINISTRATION**

Enc.

### **Affiliated Clubs**

Garie Era Burning Palms  
Wanda Elouera North Cronulla Cronulla  
Clovelly Coogee Maroubra South Maroubra  
North Bondi Bondi Tamarama Bronte

**Australian for life.** 



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## Expression of Interest Nomination Form - SLSS Director of Lifesaving 2013-2014

I \_\_\_\_\_ wish to nominate my interest for the position of **SLSS Director of Lifesaving for the remainder of 2013-2014 season.**

Nominees Signature \_\_\_\_\_

Proposed by (Signature & Print Name) \_\_\_\_\_

Seconded by (Signature & Print Name) \_\_\_\_\_

Date \_\_\_\_\_

**Send Form to**      **FAX 9019 0720**    **EMAIL [awards@surflifesavingsydney.com.au](mailto:awards@surflifesavingsydney.com.au)**  
**or MAIL PO Box 6006 Malabar 2036 BY COB FRIDAY 7<sup>TH</sup> MARCH 2014**

**NOTE : All nomination forms MUST contain the signature of the nominee, proposer and seconded. To be nominated you must be a full financial member of a Surf Club. Forms will not be accepted if not complete.**

Branch Office Use Only:    Nomination received at office : Date \_\_\_\_\_

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