Surf Life Saving Australia Ltd Locked Bag 2 / Level 1, 1 Notts Avenue BONDI BEACH NSW 2026

Phone: (02) 9300-4000



MANUAL AWARD DATA IN SURFGUARD

- ✓ Please print clearly.
- ✓ Please attach additional information if space is not sufficient.
- ✓ After endorsement, please return completed form to your State.
- ✓ States will enter information once verified.

Privacy

These personal details are being collected by Surf Life Saving Australia for the purpose of entering awards that may not have been transitioned in your State Surfguard cutover. The personal information you provide here will be disclosed to the system developers, HPFM, solely for the purpose of entering the award, but will not be disclosed to any other third party for any reason. You have the right to access the information held about you by Surf Life Saving Australia.

Information

Club, Branch and Support Service Administrators who fill in the following details will need to endorse the information provided by members to verify its accuracy. Proof of an award such as a copy of the original certificate, an award number, copy of page from annual report or place and date attained will assist your State in verifying these details.

Please also answer the questions on the following page regarding your award details.

Club/Branch/Service name	State	
Awardees Details		
First Name	Last Name	
Surfguard Member No. (if known)	D.O.B	
Daytime Phone	Do you attest the information Yes / No below is correct?	·
Email or Signature		

- Is this application for NEW or CORRECTION to a Members award details? (please circle)
- Please fill out the information overleaf for the awards you would like entered.
- Note: Support for Surfguard can be found at surfguardhelp@slsa.asn.au

See over for details...

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Award Details

Award Type (Eg. Bronze, ARC etc)	Award Number (if known)	Date Attained (or Year attained)	Club (membership at the time)	Proof Provided / Comments (eg, cert. Number, Annual report copy)

ENDORSEMENTS

	Club	Branch	State	
Date				
Position				
Name				
Signature				

Please return completed form to the next highest Authority.

Office Use ONLY

Entered into Surfguard	Ву	Initial & Date
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