



Surf Life Saving Sydney



Junior Committee

JLOTY Schedule 2015-2016

All completed and signed forms, being both SLSNSW and Branch questions with Club endorsement to be at the Branch Office by

EOB Dec 9th 2016 in hard copy -

No faxed or emailed copies will be accepted due to legibility issues

Assessment of the applications will take place immediately the deadline has passed

Finalists advised Dec 16th 2016

Interviews with the selected finalists will be held at the Branch Office on

Jan 31st 2017 from 6.30pm onwards

Scheduled for interviews to be forwarded once the finalists are selected

Highly Commended and the Winners will be announced at the Branch Age Championships
Sunday 12th Feb 2017



Surf Life Saving Sydney



Board of Junior Development

Questions for JSLOTY 2016 - 2017
Extra space can be used for the answers

Outline three important things you have learnt from being part of Surf Life Saving and Nippers

What are you looking forward to personally in your future within Surf Life Saving

If you are selected as the SLS Sydney JLSOTY what do you think you will bring to the position

If you are selected as the SLS Sydney JLSOTY what do you want to achieve in the following season.



Comments:

Nomination Form 2016/ 2017 Junior Lifesaver of the Year

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Participant Details													112.1
Surname						Given Names							
Address													
Phone Number	imher .						Email Address						
There italizes						Email Address							
Club Name					Branch Name								
DOB	Age							Male	Female				
Ladies Shirt Size 8	10	12	14	16	18	Mens Shirt	Size	XS	s M	L	XL	XXL	
								,,,		_		70.2	
How did you hear ab	out t	his or	por	tunity	?								
Circular / Club Mail	Club Representative					Branch Representative SLSN				SW Staff Member			
Facebook	SMS					Email			Othe	r – pl	lease sp	ecify	
Emergency Contact I	and the second	State of Street											
Name	Relati	ationship Mobile Pl						Home / Work Phone Number		Email Address			
									\vdash				
Travel Details												S. trais	
What mode of transport d	o you i	intend	to use	to get t	o the progran	n?	Car	r Bu	s T	Train	Pl	lane	
Please complete the following if you will be flying													
Which airport will you dep	art fro	m?											
Are there other details we need to know before booking your flights?													
Please note: Flight details are non-negotiable unless in an emergency. If you have any specific requests, please inform us immediately. Your commitment to this is important. Any 'no shows' or cancellations by participants will require full payment of all incurred expenses by that participant.													
Club Endorsement													
CLUB NAME													
	Name			Τ				Signature					
CLUB CONTACT	ı	Position				Date							
Comments:				-									
			723										
Branch Endorsement		K I I	25										
BRANCH NAME	_												
BRANCH CONTACT	-	Name					_	Signature					
		Positio	n		2.50		Dat	te					



Medical and Consent Form 2016/ 2017 Junior Lifesaver of the Year

SPECIAL REQUIREMENTS	(3) 20 750 (5) 分约以为公	在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个				
Please identify any special needs or requ	uirements (eg wheelchair access, food allerg	ies etc)				
MEDICAL INFORMATION	ENGINEER WAS AND THE	AND STREET OF STREET SECURIOR				
Do you suffer from any medical condition Do you require medication for this cond	ns? (eg allergies, epilepsy, asthma, diabete ition?	s etc)				
If yes to either question – please give de						
		•				
RISK WAIVER		· 2018年2月1日 - 1918年1日 - 1				
In the case of an emergency, I authorise t medical or surgical treatment as may be		communicate with me, to arrange for me to receive such				
	·	minimise any risk of personal injury within practical				
boundaries, accidents do happen and all	physical activities carry the risk of personal i	injury. I acknowledge and accept that there is an inheren	nt			
risk of personal injury in physical activitie	s that will be undertaken as part of the prog	gram.				
Participant's Signature	Parent / Guardian Signature	Date				
MEDIA CONSENT						
l agree to allow Surf Life Saving NSW to use my name and any photographs, sound and film recordings taken of me at this program for the						
promotion of the organisations services a	nd initiatives to the media and the general p	public.				
Participant's Signature	Parent / Guardian Signature	Date				
Privacy Statement	12005					
The information will be provided to staff of the	program and their facilitators where necessary an	oluntarily provide to enable processing of enrolments for progrand by providing this information you consent to this disclosure. A	Any			
information provided by you will be stored on a database that will only be accessed by authorised personnel and is subject to privacy restrictions. Any information provided by you to the organisation can be accessed by you during standard office hours, and updated by writing to us or by contacting us on 02 9471 8000.						
SURF LIFE SAVING AUSTRALIA	CODE OF CONDUCT					
		a participant at this program, you agree to meet the				
following requirements in regard to your conduct during the program (including both formal and informal activities). 1. Respect the rights, dignity and worth of others						
2. Be fair, considerate and honest in all dealings with others, and be a positive role model						
 Make a commitment to providing quality service Be aware of, and maintain an uncompromising adhesion to, SLSA standards, rules, regulations and policies 						
Demonstrate a high degree of individual responsibility, especially when dealing with persons under 18 years of ageContribute to the provision of a safe environment for the conduct of all activities within surf lifesaving						
7. Ensure that your actions are of the highest standard at all times, and that, at no time, will your conduct be construed as bringing SLSA or SLSNSW into disrepute						
Further, you agree to:						
a. abide by the code of conduct outlined aboveb. maintain a 'duty of care' towards others and an accountability for matters relating to the program						
c. foster a collaborative approach to the program and its activities d. accept responsibility for your personal learning and that of the group						
e. be a positive role model for surf lifesavers and SLSA						
Participant's Signature	Parent / Guardian Signature	Date				

1.	In what ways do you contribute to surf lifesaving at club, branch and other levels (eg assisting Nippers)?
2.	What do you feel you have personally achieved through your involvement in surf lifesaving?
3.	What goals do you want to achieve in surf lifesaving and why?
4.	What role do you feel surf lifesaving has in the community?
5.	If you could initiate one program in your club, what would it be and why?