



Expression of Interest Form Lifeguard Service

Name:

Club:

Home Address:

P/Code:

Date of birth:

Age as of 1st October 2011:

Phone

Home:

Work:

Mobile:

E-mail:

Have you or do you carry or suffer any injury/impairment that may affect your ability to complete any physical components of the training and/or duties required.

Yes / No

If yes, please provide details:

Awards:

Awards will be validated from Surfguard, if not current then the application will not proceed further.

For awards held outside of SLSSA, please provide copies.

For further information regarding awards refer to Circular C11032 on the SLSSA web site.



Previous Lifeguard Experience

YES / NO (please circle)

If yes please provide brief summary

Acknowledgements:

- I understand that all lifeguard operations, including training may require me to travel between different locations.
- I acknowledge the Senior First Aid qualification is to be HLTF301B Apply First Aid and understand that I am required to hold and be current in all awards at the time of application and maintain these for the duration of my employment is successful.

Applicant endorsement:

I _____ confirm that all details provided in this application are true and correct and that I am physically fit and prepared to undertake all appropriate training sessions associated with the lifeguard service.

Date:

Signature

**Completed and suitably endorsed applications should be returned by
12 noon Friday 11 November**

No late applications will be accepted.

Surf Life Saving SA
PO Box 108
Torrensville SA 5031