



SURF LIFE SAVING SUPPORT OPERATIONS MEMBER APPLICATION

Group/Service Name:

New member

or

Existing Member Re-application (annually)

APPLICANT DETAILS

Last name:

First name:

Address:

Suburb:

State

Postcode:

Telephone: (H)

(W)

(M)

Email:

Date of Birth: ____ / ____ / ____

Club:

Branch:

SUPPORT SERVICES APPLYING FOR (one application form per service):

RWC Operator

JRB Crew

Duty Officer

JRB Driver

SurfCom Operator

JRB Skipper

ORB Skipper

ORB Driver

ORB Crew

Patrol Support Officer

Other: _____

MINIMUM PRE-REQUISITE (tick box for appropriate awards held and proficient):

Bronze Medallion

Senior First Aid

Advanced Resuscitation

IRB Crew

IRB Driver

Silver Medallion Patrol Captain

JRB Crew

JRB Driver

JRB Skipper

ORB Crew

ORB Driver

ORB Skipper

Radio Operators

Silver Medallion Advanced Emergency Care

Motor Vehicle Licence

NSW Boating Licence / PWC License

Pre-requisite Matrix

	Age	BM	MVL	SMPC	SFA	ARC	VHF	TOC	CNC	JRBC	ORBC	ROC
RWC operator	18	•	•	•	•	•						
JRB Crew	16	•				•						
Duty Officer	18	•	•	•	•	•						
JRB Driver	18	•	•			•				•		
SurfCom Ops	17						•					•
JRB Skipper	18	•	•			•	•	•	•	•		
ORB Crew	16	•				•						
ORB Driver	18	•	•			•	•				•	
ORB Skipper	18	•	•		•	•	•	•	•		•	

BM =Bronze Medallion, MVL=Motor Vehicle Licence, SMPC=Silver Medallion Patrol Captain, SFA=Senior First Aid, ARC = Adv Resuscitation, VHF= Marine Radio Licence, TOC=Training Officers Certificate, CNC=Coastal Navigation Course, JRB=Jet Rescue Boat Crew, ORBC=Offshore Rescue Boat Crew, ROC=Radio Operators Certificate, BL/PWC=Boating Licence/PWC Licence

LIFESAVING EXPERIENCE AND REASON FOR JOINING – SLS Experience (internal and external experience)

APPLICANT DECLARATION

I have an understanding of the Support Service position/s that I have applied for and the relevant sections of the SLSNSW Standard Operating Procedures Manual. I agree to comply with SLSA & SLSNSW current training manuals & policies which includes holding the correct (and current) pre-requisites at all times when operating the rescue craft. I also understand that SLSNSW and the Branch have the right to withdraw any endorsement at any time should I breach any of the above

Signed: _____

Date: ____ / ____ / ____

ENDORSEMENT

Branch Endorsement

Branch Director of Lifesaving / Branch Support Service Officer to tick:

- Minimum Pre-requisites checked
- Induction (SOPS, resources and Job Description)
- Form completed correctly
- Application endorsed

Signature: _____

Branch Director of Lifesaving / Branch Support Services Officer

State Endorsement

- Verified, Validated and Recorded

Signature: _____

Surf Life Saving New South Wales