



# FAR NORTH COAST BRANCH FACILITATED COURSE – CLUB NOMINATION FORM

**COURSE:**

**CLUB:**

**DATE:**

NAME	DOB	EMAIL	MOBILE	MEMBER ID # (from Surfguard)

I certify that the candidates nominated above are financial members of  
have the required pre-requisites for the subject course.

Surf Club. All of the candidates

**NAME:**

**SIGNATURE:**

**POSITION:**

**DATE:**

**Please return completed forms to [dir.education@surflifesavingfnc.com](mailto:dir.education@surflifesavingfnc.com)**