



Application Form – 2010 SLSA Leaders' Conference

- ✓ Please print clearly.
- ✓ Please attach additional information if space is not sufficient.



Privacy

These personal details are being collected by Surf Life Saving Australia for the purpose of selecting participants for the 2010 SLSA Leaders' Conference. This information will not be disclosed to third parties. You have the right to access the information held about you by Surf Life Saving Australia.

Personal details

First Name	_____	Last Name	_____
Date of birth	_____	Male / Female (please circle)	
Do you have special dietary needs? (please state)	_____		
Address	_____ _____		
Town	_____	State	_____ Postcode _____
Phone (H)	_____	Phone (W)	_____
Phone (M)	_____	Fax	_____
Email	_____		

Shirt Size (please circle)

Mens Sizes	S	M	L	XL	XXL	XXXL
Ladies Sizes	8	10	12	14	16	18

Travel details

What mode of transport do you intend to use to get to the program?

Car Bus Train Plane

Please complete the following if you will be flying

Which airport will you be required to depart from? _____

Do you have any flight preferences? _____



Surf lifesaving background

Club name _____ SLSC

Year joined
 SLSA _____

What SLSA Awards do you hold?

_____	_____	_____
_____	_____	_____
_____	_____	_____

What is your current primary leadership role within Surf Life Saving?

What leadership positions have you held within Surf Life Saving in the last five years?

_____	_____	_____
_____	_____	_____
_____	_____	_____

What single achievement within surf lifesaving are you really proud of?

Educational background

Please list your education background starting at the most recent studies

Course	Year(s)	Institution
_____	-	_____
_____	-	_____
_____	-	_____
_____	-	_____
_____	-	_____



Occupational background

Please list your education background starting at the most recent studies

Position	Year(s)	Organisation
_____	-	_____
_____	-	_____
_____	-	_____
_____	-	_____
_____	-	_____

What leadership positions have you held within your occupation in the last five years?

_____	_____	_____
_____	_____	_____
_____	_____	_____

Other background

Please list other roles you have been involved in

Position	Year(s)	Organisation
_____	-	_____
_____	-	_____
_____	-	_____
_____	-	_____
_____	-	_____

What other leadership positions (other than those in surf lifesaving or your occupation have you held in the last five years?

_____	_____	_____
_____	_____	_____
_____	_____	_____

What role would you like to be in within surf lifesaving in three(3) years time?



What key issues do you see facing Surf Life Saving (either club/branch/state/national) over the next 3 years?

What skills/ understanding /knowledge do you want to get from this conference?

What skills/ understanding /knowledge can you contribute to this conference?



SLSA CODE OF CONDUCT AGREEMENT LEADERS' CONFERENCE 2010

SLSA's Code of Conduct for members outlines the standard of conduct expected of members engaged in any SLSA activity. It is required that all participants in SLSA programs comply with that Code of Conduct.

As an SLSA Leaders' Conference participant, you agree to meet the following requirements in regard to your conduct during the 2010 SLSA Leaders' Conference 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
3. Make a commitment to providing quality service
4. Be aware of, and maintain an uncompromising adherence to, SLSA standards, rules, regulations and policies
5. Demonstrate a high degree of individual responsibility, especially when dealing with persons under 18 years of age
6. Contribute 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 into disrepute

Further, you agree to:

- a. abide by the code of conduct outlined above
- b. maintain a 'duty of care' towards others and an accountability for matters relating to the scholarship program
- c. foster a collaborative approach to the scholarship program and its activities
- d. accept responsibility for your personal learning and that of the scholarship group
- e. take the time necessary to plan and prepare activities required by the program
- f. be a positive role model for surf lifesavers and SLSA

Signature of Participant: _____

Date: _____



Payment Details

This document becomes a **tax invoice** upon payment. Please photocopy and maintain for your records.

I enclose payment by:

<input type="checkbox"/> Cheque	<input type="checkbox"/> Credit Card		
for the amount of \$ 440 / \$220 <small>(please circle)</small> , including GST on ____/____/2010 (date)			
<i>If paying by Credit Card, please list the details below.</i>			
Card type	Bankcard	Visa	Mastercard
		<small>Please circle</small>	
Card number	_____	Expiry date	____/____
Name on card	_____	Signature	_____

Club Endorsement

Club name _____	Name, position and signature of club contact	Date _____
	_____ Name _____ Position _____ Signature	

Branch Endorsement

Branch name _____	Name, position and signature of branch contact	Date _____
	_____ Name _____ Position _____ Signature	

State Endorsement

State name _____	Name, position and signature of state contact	Date _____
	_____ Name _____ Position _____ Signature	