

2018 BP Surf Rescue North Island Championships

Accommodation Report Form

This form is to be completed by the Team Manager **and** the Proprietor/ Manager/ Owner of the team's accommodation **before the team departs from their accommodation.**

The completion of this form is to enable the Surf Life Saving movement to protect its good reputation and maintain a standard acceptable to the accommodation industry. This report is aimed at monitoring our movement's behaviour whilst travelling and will act as a reference for teams and the accommodation industry alike, when future bookings are made.

Name of Club: _____

Team Manager: _____ Assistant Manager: _____

Accommodation at: _____ Total Persons: _____

(NOTE: Please fill in one form for each location the team has accommodated.)

Date Arrived: ___/02/2018

Date Departed: ___/02/2018

PROPRIETOR / MANAGER / OWNER'S COMMENTS:

SIGNED: _____
(Proprietor)

_____ (Motel/Hotel)

SIGNED: _____
(Team Manager)

This form is to be returned to SLSNZ by 18th February 2018, and should be emailed to johnny.lifejacket@gmail.com .