



SURF LIFE SAVING®
EASTERN REGION

Rookie Teams/Top Rookie Declaration and Entry Form

The club appointed 'Rookie Co-ordinator' for the 2018 Rookie Championships must complete this form.

I _____, Rookie Co-ordinator of _____, agree by signing this form that my club will participate in the 2018 Rookie Championships in accordance with the rules and conditions as laid down in:

The 2017/18 Rookie Competition Manual
Surf Sport Competition Manual (9th edition v2)
Any further rules and conditions communicated by SLSNZ

I accept responsibility on behalf of my club for the following:

All equipment trailers and vehicles moving club members and/or equipment to an event being currently registered / warranted and road worthy at the time of travel.
The behaviour of club members for the duration of travel to the carnival, at the carnival and travel home following the carnival.
Attendance at the Team Managers meeting
All participating members being a current club member for the 2017/18 season.

Team Name:

Team Member Registration:

Membership Number:

Team Manager/Coordinator Details:

Name:

Email:

Phone:

Signed:

Date:

National Partners



Regional Partners

Primary Partner



Surf Life Saving New Zealand – Eastern Region

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