**Innovation of the Year**

The nominees agree to all nomination details being made public. Details may be used by SLSNZ and/or the club for promotional purposes. Provide as much relevant information as possible for the CURRENT SEASON only. Retrospective information cannot be considered.

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| **About you** (the person making the nomination) | |
| Your name |  |
| Your club and position |  |
| Your email address |  |
| Your phone number |  |

|  |  |
| --- | --- |
| **Nominee details** (the person you are nominating) | |
| Name of nominee |  |
| SLSNZ membership number |  |
| Current club |  |
| Contact phone number |  |
| Contact email |  |

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| **Application Details** | Detail the relevant contribution the nominee has made in the following areas. |
| The purpose of this award is to recognise a member, club, business or group who through innovation have been able to enhance Surf Life Saving New Zealand’s ability to achieve its purpose of ‘preventing drowning in New Zealand’.   * Projects, Programmes or Products will be considered * Must be original or not currently being done elsewhere in NZ * Extent of impact on SLS is a consideration | |
| **Describe your Innovation and the impact it has had on SLS:** | |

Please return all nominations to [Chris.jeffery@surflifesaving.org.nz](mailto:Chris.jeffery@surflifesaving.org.nz) by **Sunday 28th of April 2019**