Surf Life Saving New Zealand

Taranaki Awards  
Nomination Form

### 

### Updated March 2020

**NB – Please fill out and return all forms in Microsoft Word (NO PDF’s)**

## **Nomination Form Lifeguard 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The most important area of selection is the contribution to surf lifesaving during the period from May 1 2019 to April 30 2020. The successful nominee will be seen as a role model for surf lifeguards and therefore should portray a picture of health, knowledge, capability, credibility and leadership.* | | | |
| Patrolling duties |  | | |
| Award training duties |  | | |
| Instructional |  | | |
| Examining duties |  | | |
| Club activities specific to surf lifesaving services |  | | |
| Regional activities specific to surf lifesaving services |  | | |
| Rescue related activities |  | | |
| Personal award development to improve lifesaving  Capability |  | | |
| Advocacy of surf lifesaving / beach safety in the community |  | | |
| Leadership of self and others |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form Instructor 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The most important area of selection is the contribution to overall enhancement of lifeguard capability during the period May 1 2019 to April 30 2020.* | | | |
| Club and Regional Lifeguard training duties |  | | |
| Local/Regional Examining duties |  | | |
| Regional Schools (such as powercraft schools etc) |  | | |
| National Lifeguard School instructing |  | | |
| Personal award development to improve lifesaving capability |  | | |
| Community involvement in surf lifesaving instruction |  | | |
| Advocacy of surf lifesaving / beach safety in the community |  | | |
| Leadership of self and others |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form Surf Official 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a member who has made an outstanding contribution to the Officiating of surf lifesaving sport competitions in 2019/2020.* | | | |
| Local, Regional, National and International officiating positions held |  | | |
| The level and quality of officiating achieved |  | | |
| Number of competitions officiated |  | | |
| Development of new or emerging officials in the club or region |  | | |
| Personal development undertaken to improve officiating performance |  | | |
| Advocacy of surf lifesaving / beach safety and surf sport in the community |  | | |
| Leadership of self and others |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form Coach 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a member who has made an outstanding contribution to the coaching of Surf Sport Teams and/or Individuals in 2019/2020.* | | | |
| Club, Regional and National Coaching Positions |  | | |
| Results achieved due to coaching influence |  | | |
| Number and capability of athletes coached |  | | |
| Personal development undertaken to improve coaching performance |  | | |
| Advocacy of surf lifesaving / beach safety and surf sport in the community |  | | |
| Leadership of self and others |  | | |

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## **Nomination Form Sportsman 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a Male individual who has achieved outstanding results at surf lifesaving sport competitions in 2019/2020.* | | | |
| Selection and achievement at international competition. |  | | |
| Selection and achievement at national competitions. |  | | |
| Selection and achievement at regional competition. |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form Sportswoman 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a female individual who has achieved outstanding results at surf lifesaving sport competitions in 2019/2020.* | | | |
| Selection and achievement at international competition. |  | | |
| Selection and achievement at national competitions. |  | | |
| Selection and achievement at regional competition. |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form U19 Sportsman 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a junior male individual who has achieved outstanding results at surf lifesaving sport competitions in 2019/2020.* ***Nominees must be an Under 19 male.*** | | | |
| Selection and achievement at international competition. |  | | |
| Selection and achievement at national competitions. |  | | |
| Selection and achievement at regional competition. |  | | |

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## **Nomination Form U19 Sportswoman 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a junior female individual who has achieved outstanding results at surf lifesaving sport competitions in 2019/2020.* ***Nominees must be an Under 19 female.*** | | | |
| Selection and achievement at international competition. |  | | |
| Selection and achievement at national competitions. |  | | |
| Selection and achievement at regional competition. |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form Sports Team 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Team name | |  | |
| Team members | |  | |
| SLSNZ membership numbers | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a team who have achieved outstanding results at surf lifesaving sport competitions in 2019/2020.* | | | |
| Selection and achievement at international competition. |  | | |
| Selection and achievement at national competitions. |  | | |
| Selection and achievement at regional competition |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

## **Nomination Form U19 Sports Team 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** | | | |
| Team name | |  | |
| Team members | |  | |
| SLSNZ membership numbers | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **Nominator details** | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The purpose of this award is to recognise a Junior team who have achieved outstanding results at surf lifesaving sport competitions in 2019/2020.* ***Nominees must be Under 19.*** | | | |
| Selection and achievement at international competition. |  | | |
| Selection and achievement at national competitions. |  | | |
| Selection and achievement at regional competition |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Thursday 30 April, 2020

**Awards of Excellence  
  
Nomination Form – Volunteer of the Year 2019/20**

|  |  |
| --- | --- |
| **Nominees details** | |
| Date of nomination: |  |
| Nominees full name: |  |
| Current Club: |  |
| SLSNZ Membership number: |  |
| Area/ Region: |  |
| Phone number: |  |
| Email: |  |

|  |  |
| --- | --- |
| **Nominators details** | |
| Club officials name: |  |
| Club officials role: |  |
| Phone number: |  |
| Email: |  |

Nominees and Club Officials declare that the information is a true and accurate record. The nominees agree to all nomination details being made public and may be used by SLSNZ and/or SLS Clubs for promotional purposes.  
Please provide as much RELEVANT information to the Award as possible for the most RECENT SEASON only.   
**Retrospective information will NOT be considered**.

**Please limit each answer to 150 words**

|  |
| --- |
| **Please confirm the claimed volunteer service took place only within the most recent season (i.e. <Month/Year to Month/Year>) only?** |

|  |
| --- |
| **Volunteer Contribution – CLUB/LOCAL**  **Detail the volunteer contribution the member has made towards enhancing surf life saving at their club or locally for the most recent season.**  For example: Leadership, committees, management, administration, member recruitment & induction, strategy, funding/ sponsorship, lifesaving, junior surf/nippers, lifeguarding (on the beach), sport, advocacy, instructor (SLGA, IRB), asset management, powercraft, stakeholder liaison, club welfare officer, special projects etc. |

|  |
| --- |
| **Volunteer Contribution – REGIONAL**  **Detail the volunteer contribution the member has made towards enhancing surf life saving regionally for the most recent season**  For Example:   * Regional Roles – Examiner (SLGA, IRB), Patrol Auditor, Course Facilitator, Duty Officer, Event Guard, Peer Supporter, Surf Official, Event Manager, Event First Aid, Event Safety, Rep Team management etc. * Regional Programmes – Development camps (lifeguard, IRB), Intermediate Lifeguard school, Instructor/ Examiner briefing, Patrol Captains Workshop, Instructor Workshop, IRB Engine Maintenance workshop etc., sport programmes (coaching, competition). * Regional Leadership – Local Committees (sport, lifesaving, junior surf, Club Chairs), Chief Examiner (SLGA, IRB), Chief Patrol Auditor, SLSNR Board etc. |

|  |
| --- |
| **Volunteer Contribution – NATIONAL**  **Detail the volunteer contribution the member has made towards enhancing surf life saving regionally for the most recent season.**  For Example:   * National Roles – Course Facilitator, Event Management, Event Referee, Event Guard, Surf Official, Selector, National Team Management (incl coaching) etc. * National Programmes – National Lifeguard School, Instructor/ Examiner briefing, Honours & Awards etc. * National Leadership – National Committees (Sport, Lifesaving, Medical, Club Chairs), SLSNZ Board, ILS delegates etc. |

|  |
| --- |
| **Volunteer Personal Development**  **Detail any relevant professional development and training undertaken in the most recent season that enhanced their capability as a volunteer:** |

|  |
| --- |
| **Any Other Information**  **Detail any additional information relevant to the award for the most recent season only:**  For example: Volunteer work that enhanced the image of surf life saving, promotion & marketing of the movement, water safety advocacy etc. |

**Awards of Excellence  
  
Nomination Form – Innovation of the Year 2019/20**

|  |  |
| --- | --- |
| **Nominees details** | |
| Date of nomination: |  |
| Nominees full name: |  |
| Current Club: |  |
| SLSNZ Membership number: |  |
| Area/ Region: |  |
| Phone number: |  |
| Email: |  |
| Project Name |  |

|  |  |
| --- | --- |
| **Nominators details** | |
| Club officials name: |  |
| Club officials role: |  |
| Phone number: |  |
| Email: |  |

Nominees and Club Officials declare that the information is a true and accurate record. The nominees agree to all nomination details being made public and may be used by SLSNZ and/or SLS Clubs for promotional purposes.  
Please provide as much RELEVANT information to the Award as possible for the most RECENT SEASON only.   
**Retrospective information will NOT be considered**.

**Please limit each answer to 150 words**

|  |
| --- |
| **Can you confirm this is an original concept (not being done anywhere else in NZ)?** |

|  |
| --- |
| **Please describe what the specific innovation is, what issues/problems it solves, who were the parties/people involved, any sponsors, costs/ affordability, ease of implementation, and any other relevant background (e.g. media coverage):** |

**Please provide details the contribution/ impact the innovation has had for your Club for the most recent season and/ or will have in the future (i.e. outcomes):**

**Please provide details the contribution/ impact the innovation has had for Surf Life Saving regionally, nationally or internationally for the most recent season and/ or will have in the future (i.e. outcomes):**

|  |
| --- |
| **Please describe the ability of the innovation to enhance the purpose of surf life saving – to save lives on our beaches:** |

|  |
| --- |
| **Detail any other additional information relevant to the award:** |

## **Nomination Form Michael Taylor Award**

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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nominee details** (the person you are nominating) | | | |
| Name of nominee | |  | |
| SLSNZ membership number | |  | |
| Current club | |  | |
| Contact phone number | |  | |
| Contact email | |  | |
| **About you** (the person making the nomination) | | | |
| Your name |  | | |
| Your club and position |  | | |
| Your email address |  | | |
| Your phone number |  | | |
| **Application Details** | | | Detail the relevant contribution the nominee has made in the following areas. |
| *The most important area of selection is the overall contribution to the enhancement of the surf lifesaving environment during the period May 1 2019 to April 30 2020.* | | | |
| Contribution to Mentoring SLS members Club/Regional/National levels |  | | |
| Contribution to Lifesaving Club/Regional/National levels *(minimum of 20 hours to be nominated)* |  | | |
| Creates/Contributes to a fun and inclusive club culture |  | | |
| Contribution to Surf Sports Club/Regional/National levels |  | | |
| Representation of Club members through committees – club and local area |  | | |
| Areas of club/regional/national involvement |  | | |
| Contribution to Programmes and services run by SLSNZ |  | | |
| Demonstrated leadership by the nominee |  | | |
| Advocacy of surf lifesaving / beach safety in the community |  | | |

Please return all nominations to [joss.urbahn@surflifesaving.org.nz](mailto:jacob.davies@surflifesaving.org.nz) by Monday 20 April, 2020