**Nomination Form Event Guard 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 |  |

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| --- | --- |
| **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 who has made an outstanding contribution to the event guarding of surf lifesaving sport competitions in 2019/2020.* | | |
| Local, Regional, National and International event guarding positions held |  | |
| The level and quality of event guarding achieved |  | |
| Number of competitions event guarded |  | |
| Development of new or emerging event guards in the club or region |  | |
| Personal development undertaken to improve event guarding performance |  | |
| Advocacy of surf lifesaving / beach safety and surf sport in the community |  | |
| Leadership of self and others |  | |

Please return all nominations to [Luke.smith@surflifesaving.org.nz](mailto:Luke.smith@surflifesaving.org.nz)by the 30th April 2020