



EXTERNAL EVENT SAFETY CLUB REGISTRATION FORM

If your club is interested in providing external safety services, please complete this form with as much information as possible and email to event.safety@surflifesaving.org.nz

CONTACT INFORMATION

All fields must be completed

Club Name -

Club Event Safety Coordinator/s -
(Name & number)

Club Event Safety Coordinator/s -
(eMail)

Club Administrator *(Person creating & submitting lifeguarding quotes)* -

Club Administrator -
(eMail)

Club Finance Officer -
(If different from above)

Club Finance Officer -
(eMail)

Estimated Members Available
Peak Season (Patrolling) **Peak Season -**
Off Season **Off Season -**

Maximum Travel distance from your club -
you are prepared to travel

Key Assets *ie. Number of IRBs, gear trailers, rescue boards etc.*

x IRB's x RWC's x Water Safety Coordinators
 x Road Trailers x Rescue Boards