

CIRCULAR



TO: Club Secretaries
Club Coaches
Team Managers
Competitors

DATE: 15th October 2009

SUBJECT: SLSCC Inter-Branch Team

FROM: Paul Quick
Director of Surf Sports

Surf Life Saving Central Coast hereby invites interested members to nominate for the 2009-10 SLSCC Inter-Branch Team.

The SLSCC Inter-Branch Team represents an exciting opportunity for SLSCC competitors (from U12 to Open age groups, male and female boat crews) to represent SLSCC at the NSW Inter-Branch Championships to be held at Cape Hawk on the weekend of December 12 – 13 2009.

A detailed Selection Policy is available for the purpose of providing transparency to the team selection process. The policy has been distributed to Clubs in Policy Bulletin dated 15th October 2009 and a copy can be obtained by contacting SLSCC.

For your information purposes, the Selection Committee is comprised of:

Jeff Doyle
Peter McIntyre
Garry Mensforth
Michael Stone

Please find on the following pages, a nomination form which has been included for the purpose of easily identifying those competitors who wish to be selected and also for gathering personal information in advance to assist with the logistical process. It is not compulsory to complete a Nomination Form, however Selectors and Team Management would greatly appreciate it in their endeavour to organise the best possible experience for the selected team.

For your information purposes, Team Selection Carnivals are:

1. MacMasters Beach Senior Carnival – 31/10/09
2. Copacabana Junior Carnival – 1/11/09
3. Round 1 East Coast Surf Festival Dixion Park – 7/11/09
4. Terrigal Junior Carnival – 15/11/09

Please contact Peter McIntyre, Team Manager on 0409 419 922 if you have any questions.



2009-10 SLSCC Inter-Branch Team NOMINATION FORM

Age group as at midnight 30th September 2009:

<input type="checkbox"/> Open
<input type="checkbox"/> U19
<input type="checkbox"/> U17
<input type="checkbox"/> U15
<input type="checkbox"/> U14
<input type="checkbox"/> U13
<input type="checkbox"/> U12

Preferred discipline:

<input type="checkbox"/> Swim
<input type="checkbox"/> Board
<input type="checkbox"/> Ski
<input type="checkbox"/> Beach Sprint
<input type="checkbox"/> Beach Flags
<input type="checkbox"/> Ironman / Ironwoman
<input type="checkbox"/> Boat

Personal Details:

Club:			
Full Name:			
Preferred Name:			
Postal Address:			
E-mail Address (Desirable)			
Telephone:	Home:	Work:	
	Mob:	Fax:	
Date of Birth:			
Next of Kin name:			
Next of Kin relation:			
Next of Kin Telephone:	Home:	Work:	
	Mob:	Fax:	

Clothing Details:

Tick one box for each clothing item ✓

Shirt	XS S	M	L	XL	XXL
Swimwear – Women Two Piece Women's	8	10	12	14	16
Swimwear – Girls Two piece Girls	8	10	12	14	16
Swimwear – Men	14	16	18	20	22
Swimwear – Boys	8	10	12	14	

Nomination must be signed by your Club: Coach; Team Manager; Director of Surf Sports/Competition or Executive member.

I certify that _____ is a member of _____
and that this application has the endorsement of the club.

Name:		Signed:	
Position:		Date:	

Signature of applicant

_____ Date _____

In signing this form I acknowledge that the information in this application is accurate to the best of my knowledge.

Privacy Act Information

By submitting this form you are:

- Consenting to Surf Life Saving Central Coast using these details for the purpose of administration.
- Acknowledging your right to access, and if necessary correct this information in accordance with the Privacy Act, and subsequent amendments.

Return completed application:
 ☎ Development Officer, SLSCC, PO Box 5029, Chittaway Bay, NSW 2261
 ☎ (02) 43530298 ✉ Support@slscc.com.au ☎ (02) 43530299
By: Friday 30th October 2009