



## MANUAL AWARD DATA IN SURFGUARD

- ✓ Please print clearly.
- ✓ Please attach additional information if space is not sufficient.
- ✓ After endorsement, please return completed form to your State.
- ✓ States will enter information once verified.

### Privacy

These personal details are being collected by Surf Life Saving Australia for the purpose of entering awards that may not have been transitioned in your State Surfguard cutover. The personal information you provide here will be disclosed to the system developers, HPFM, solely for the purpose of entering the award, but will not be disclosed to any other third party for any reason. You have the right to access the information held about you by Surf Life Saving Australia.

### Information

Club, Branch and Support Service Administrators who fill in the following details will need to endorse the information provided by members to verify its accuracy. Proof of an award such as a copy of the original certificate, an award number, copy of page from annual report or place and date attained will assist your State in verifying these details.

Please also answer the questions on the following page regarding your award details.

**Club/Branch/Service name** \_\_\_\_\_ **State** \_\_\_\_\_

### Awardees Details

First Name	_____	Last Name	_____
Surfguard Member No. (if known)	_____	D.O.B	_____
Daytime Phone	_____	Do you attest the information below is correct?	Yes / No
Email or Signature	_____		

- Is this application for NEW or CORRECTION to a Members award details? (please circle)
- Please fill out the information overleaf for the awards you would like entered.
- Note: Support for Surfguard can be found at [surfguardhelp@slsa.asn.au](mailto:surfguardhelp@slsa.asn.au)

See over for details...



**Award Details**

<b>Award Type</b> (Eg. Bronze, ARC etc)	<b>Award Number</b> (if known)	<b>Date Attained</b> (or Year attained)	<b>Club</b> (membership at the time)	<b>Proof Provided / Comments</b> (eg, cert. Number, Annual report copy)

**ENDORSEMENTS**

	<b>Club</b>	<b>Branch</b>	<b>State</b>
<b>Date</b>			
<b>Position</b>			
<b>Name</b>			
<b>Signature</b>			

Please return completed form to the next highest Authority.

**Office Use ONLY**

<b>Entered into Surfguard</b>	<b>By</b>	<b>Initial &amp; Date</b>