

Circular 039:03:10



To: Club Secretaries
Training Officers
IRB Captains

Cc: Regional Officers

From: Bernadene Hansen - Support Officer, Club Development

Date: 18 March 2010

Subject: Sliver Medallion IRB Driver or IRB Crew Award Training & Assessment

Action: Interested parties are to complete the attached registration form for their Club Chief Instructors to submit

For additional details on this Circular please contact:

Bernadene Hansen on 03 9676 6948 or email bernadene.hansen@lifesavingvictoria.com.au

Circulars are available at www.lifesavingvictoria.com.au/circulars

An IRB Driver/Crew course has been organised for anyone interested in gaining these awards, it is also an ideal opportunity for those interested in becoming Trainers & Assessors in this award strain

Course Details:

Dates:	Topic:	Time:	Venue:
April 7	Registration/OH&S	6pm to 9pm	Bonbeach LSC
April 10	Practical	10am to 3pm	Mentone LSC
April 14	Theory	6pm to 9pm	Bonbeach LSC
April 17	Practical	10am to 3pm	Mentone LSC
April 21	Navigate	6pm to 9pm	Bonbeach LSC
April 24	Practical	9am to 4pm	Bancoora LSC
April 25	Practical	9am to 4pm	Bancoora LSC
April 28	Navigate	6pm to 9pm	Bonbeach LSC
May 1	Practical	10am to 3pm	Mentone LSC
May 5	Theory	6pm to 9pm	Bonbeach LSC
May 8	Practical	10am to 3pm	Mentone LSC
May 12	Theory	6pm to 9pm	Bonbeach LSC
May 15	Assessment	9am to 4pm	Mentone LSC

All completed registration forms are to be collected by your Club's Chief Instructor and submitted via email to: Bernadene Hansen - Support Officer, Club Development via email bernadene.hansen@lifesavingvictoria.com.au

The Closing Date for registration forms is Wednesday, 31 March 2010

The completed registration forms are to be collected by the Club's Chief Instructors and submitted to; Bernadene Hansen - Support Officer, Club Development on the email address tabled above.



Silver Medallion IRB Driver & IRB Crew Certificate Registration Form

This form is to be completed by the candidates and returned to your club Chief Instructor.

Name: _____ DOB: _____ Contact Number: _____

Email: _____ I currently hold WWC: _____

I am currently a financial member of: _____

I wish to partake in the following course from Wednesday, 7 April 2010 to Saturday, 15 May 2010: (please tick one)

- IRB Crew Certificate
- Silver Medallion IRB Driver
- Training Officer IRB
- Assessor IRB

Do you have any allergies *includes Asthma*: (if so please attach relevant treatment plan)

Please list any relevant medical history, including injuries, which may impact on your participation in the course.

Emergency Contact Name: _____ Relationship: _____

Number: (AH) _____ (BH) _____

By signing below, you acknowledge that you read and understood the relevant SLSA, LSV and club membership application and declaration and reaffirm agreement with. By signing below you warrant the above information is true and correct. Furthermore you agree to abide by the SLSA, LSV and relevant club Codes of conduct, member protection Policy, Grievance Procedure and LSV VET Policy.

Name: _____ Signature _____ Date: _____

If the participant is under the age of 18, I _____ (parent or Guardian) authorise and consent to the applicant undertaking the training and further lifesaving activities as indicated on the dates above. I understand that if my child is in breach of the above codes I will be required to collect them from the training course.