

**This agreement represents the Terms and Conditions for Special Consideration and or Tertiary Education application.**

I \_\_\_\_\_ confirm that I will be patrolling at Noosa Heads SLSC  
(Applicants name) during the 2019-2020 season.

Of \_\_\_\_\_  
(insert full postal details)

Mobile \_\_\_\_\_ Email: \_\_\_\_\_

Please tick:

- ☐ Special Consideration  
☐ Tertiary Education  
☐ Other (please specify) \_\_\_\_\_

**Reason for Application:**

1. Special Consideration Yes or No
2. Tertiary Education Facility .....  
Degree being Completed ..... Campus .....  
Year of Course commencement ..... Year of expected Graduation .....  
Applicant expected SWATVAC or Exam Assessment period and dates of the forthcoming season

**REASON:**

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The Lifesaving Committee (LSC) will consider your application for Special Consideration and Or Tertiary Education assuming the following conditions will be strictly adhered to:

**Prerequisites:**

- ✓ Members must be financial and proficient at 31 December
- ✓ Members must apply directly to Lifesaving Committee and be enrolled within a tertiary education facility during the patrolling period.
- ✓ Program participants must provide tertiary calendar and scheduled dates of exam and SWATVAC periods.

**Responsibilities:**

- ✓ Special Consideration Patrolling members must fulfil patrolling commitments to achieve 45 beach patrolling hours per season and provide support at Club Special Events.

- ✓ Tertiary Link members must fulfil patrolling commitments outside notified stress periods. Defined period of patrols allowed absence without penalty.
- ✓ I will make all and reasonable attempts to attend the respective patrol allocated dates. I acknowledge that Noosa Heads SLSC has the right to cancel this application at any time in its discretion if I do not follow the club directive.
- ✓ Patrol hours previously absent are to be completed at a later date within the season allocated to fulfil NHSLSLSC patrolling requirements.
- ✓ Program participants must notify 2 weeks in advance their Patrol Captain of their planned absence.

I agree to conduct myself at all times whilst representing Noosa Heads SLSC in a way that will not bring myself or the Club in to disrepute and accordingly strictly adhere to the SLSQ (Surf Life Saving Queensland) Code of Conduct for Members.

I agree that if granted the subsidy I will undertake all my obligations to the best of my ability and will advise the Noosa Heads SLSC - Lifesaving Committee of any changes as soon as possible.

I have read and understand the Patrol Obligations Policy and Noosa Heads SLSC – Lifesaving Members Handbook.

**I have read and understand this agreement and my responsibility to the above and if I don't fulfil the above obligations or if I breach the above agreement my application can be revoked.**

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(If under 18)

☐ Approved

☐ Rejected

Comment: \_\_\_\_\_

Club Captain | Director of Lifesaving

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only :

Letter sent Y or N Date: \_\_\_\_\_

Surfguard Update Y or N