

OFFICIAL REGISTRATION FORM

2019 SUMMER SURF PROGRAM



AMBASSADOR NAME _____

REPRESENTING CLUB _____

CURRENT AGE _____ (*Ambassadors must be 18 years by 1ST May 2019*)

DATE OF BIRTH _____

OCCUPATION _____ PLACE OF EMPLOYMENT _____

AMBASSADOR CONTACT DETAILS

ADDRESS _____

POSTCODE _____

HOME _____ WORK _____ MOBILE _____

E-MAIL/S (1) AMBASSADOR EMAIL _____

(2) CLUB ADMIN EMAIL _____

(Please note that most correspondence will be sent via email, so please include an appropriate ambassador email and club Administrator email or Committee Member's email so that information can be communicated to everyone.)

CLUB CONTACT (NAME) _____ PHONE _____

In case of Emergency Contact (Name) _____ PHONE _____

SIZING FOR OFFICIAL UNIFORM

BOARD SHORTS

All sizes 8 - 22 or S - XL

SIZE _____

POLO SHIRT

Sizes 8 - 22 or S - XL

SIZE _____

SWIMWEAR

All sizes 8 - 22 or S - XL

SIZE _____

OTHER DETAILS

Have you obtained your Bronze Medallion in Surf Life Saving? **YES** Date obtained _____

NO* Date to be obtained (approx) _____

**Ambassadors must obtain &/or hold a proficient Bronze Medallion by 1st January 2019 in order to be eligible for Final Judging & Dinner.*

I _____ (print ambassador's name) **have read and hereby agree to the conditions of entry for the 2019 Summer Surf Program and have completed the Authority to Use Registered Trademark form.**

I _____ (print Club President's name) **have read and hereby agree to the conditions of entry for our club's representative in the 2019 Summer Surf Program.**

Ambassador Signature _____ Date _____

Club President Endorsement:

(Print Name) _____ Signature _____

**Please return completed registration form & Authority to use Registered Trademark form to
SLSQ Events: events@lifesaving.com.au or PO Box 3747, South Brisbane Qld 4101**

Registration acceptance is at the discretion of SLSQ. Only once the club has received written confirmation from SLSQ will your registration be progressed. The club will then be invoiced the 1st Entry Fee of \$600 (Inc. GST) to finalise your registration.

This form is to be completed and submitted for authorisation to **SLSQ** for approval by SLSQ to use registered trademark(s) of Surf Life Saving Australia and Surf Life Saving Queensland.

Please assist in completing your club information below to assist in our assessment to avoid conflicting sponsors, conflicting use of trademarks and other readily identifiable Surf Life Saving objects and phrasing that are uniquely ours.

This form must be validated and approved by your Club and lodged with SLSQ prior to commencing in the 2019 Summer Surf Program.

IMPORTANT: FAILURE TO REGISTER AND SEEK THE NECESSARY APPROVALS FOR THE PROPOSED ACTIVITY FROM SLSQ BRAND MANAGER MAY RESULT IN A \$5,000 FINE TO THE OFFENDING CLUB.

SLSQ Club making application: _____

Club Officer making application (name): _____

2019 Summer Surf Program ambassador's name: _____

Position: 2019 Summer Surf Program ambassador

Described the activity for which you seek approval to use SLSQ branding: Possible use of photographs/examples of flyers or collateral containing images of – SLS equipment, patrol uniform, red and yellow flags, etc. to be included in my Summer Surf Program portfolio and promotional collateral for fundraising events held during the Summer Surf Program. This portfolio will be a visual record of my involvement with Surf Life Saving Queensland & my fundraising and promotional activities as a Summer Surf Program ambassador and any collateral produced will be sent to SLSQ for approval prior to using.

What is the proposed benefit to the club for participating in this activity: All funds raised during the 2019 Summer Surf Program will directly benefit my club. My portfolio will be provided to the judges during the Summer Surf Program judging week to show the type of activities/community involvement and fundraising initiatives I have been involved in to raise awareness for Surf Life Saving and my club.

What date/s will this activity occur: **May 2018 – May 2019**

SLSQ reserves the right to keep a copy of the aforementioned items for their records.

What trademark or intellectual property are you seeking approval to use:

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> SLSQ Patrol Shirt | <input checked="" type="checkbox"/> SLSQ Patrol Shorts | <input checked="" type="checkbox"/> Red & Yellow cap |
| <input checked="" type="checkbox"/> Red & Yellow Flag | <input type="checkbox"/> Lifeguard uniform | <input checked="" type="checkbox"/> Other* |

**May use images of lifesaving equipment in promotional collateral and or ambassador portfolio, images of Summer Surf Program uniform.*

Approvals

Club

SLSQ Club endorsement *(may be endorsed by President, Dep. President or Treasurer of the Club seeking approval)*

Name: _____

Signature: _____

Date: _____

SLSQ

SLSQ Brand Manager Approval (Name): _____

Signature: _____

Date: _____

Please sign and return completed forms to:

Surf Life Saving Queensland Events

events@lifesaving.com.au