



Venus Bay Surf Life Saving Club Inc.

P.O. Box 754, Venus Bay, 3956. Clubhouse Telephone: 56637780

Dear fellow Surf Life Saver,

Thank you for your interest in wanting to achieve either your Silver Medallion IRB Driver or IRB Crew Certificate. These awards are your next step to becoming a Patrol Captain or professional surf lifeguard. An IRB camp will be run at the Venus Bay Surf Life Saving Club from Wednesday 23rd September at **6pm**, through to Sunday 27th of September 2009.

To be eligible for your IRB Crew Certificate, you must be over the age of 15 and hold the Bronze Medallion award. To be eligible for your IRB Drivers award you must be over the age of 17 and hold the Bronze Medallion and IRB Crew Certificate awards. To be eligible for your IRB Drivers award you must also **hold a current Victorian Boat Operator licence**, available by sitting a knowledge test through any Vic Roads office.

The Driver and Crew awards along with practical experience also include theory in the areas of: Navigation, Preparing for boat operations, IRB operations, Search and rescue operations. This course constitutes nationally recognised training with qualifications being issued by Lifesaving Victoria – a registered training organisation. All of this skill and knowledge combine to train candidates to be effective members of a patrol team tasked with providing a safe beach and aquatic environment. An outline of the program has been included in this pack.

Lunch and dinner will be catered for but candidates need to organise their own breakfast supplies, snack foods and drinks. Overnight accommodation is available in the bunkhouse. Items you will need to bring on camp include: bedding, toiletries, wetsuits, spray jacket, warm clothing, towels (more than one).

The total cost for this course is \$70 (plus boat licence for IRB Drivers). This includes food and fuel costs and the SLSA Powercraft Manual and workbook. VicRoad's Boat Operator licence details are included in this pack. Candidates must also be financial members of their club for the 2009/10 season. Please let us know if you usually pay as a family membership.

Please complete the attached forms and return, with your \$70 camp payment and membership payment by **9th of September 2009**. Cheques should be made out to Venus Bay Surf Life Saving Club. Drivers must sit their Boat Operator Licence and send in a copy of their licence by **18th September 2008**. To avoid disappointment, ensure you book in for your Boat Operator Licence knowledge test early. Please send applications to: Russell Stewart, 13 Burnside Drive, Morwell VIC 3840.

Yours Sincerely,

Camp Organisers
(Russell Stewart, Elliot Amalos)
Venus Bay Surf Life Saving Club

Contact: camps@vbslsc.org.au, 0409 233 483



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Candidate Information / Medical Form

Name _____
 Date of Birth _____ Sex: Male / Female _____
 Address _____
 Suburb _____ Post Code: _____
 Phone Number _____ Mobile _____
 Email _____
 Bunkhouse Accommodation Required: Yes/No _____

Parent/Guardian/Emergency Contacts

Name _____	Name _____
Phone (BH) _____	Phone (BH) _____
Phone (AH) _____	Phone (AH) _____
Mobile _____	Mobile _____

Medical Information

Does the candidate suffer from any of the following? (Please circle)
 -Asthma -Epilepsy -Fits -Dizzy Spells
 -Migraine -Blackouts -Heart condition
 Date of last Tetanus Injection _____

Does the candidate suffer from any allergies? If so, please provide details:

Does the candidate have any special food requirements? (Vegetarian/Vegan etc)

Does the candidate have any other disabilities or current injuries that will stop them from full participation in Bronze Activities? If so please provide details:

Is the candidate taking any form of medication? If so, please provide details:

Family Doctor _____	Phone _____
Medicare Number _____	Ambulance Cover Y/N _____
Ambulance Membership No _____	Private Healthcare Fund _____
Membership No _____	Level of cover _____

Declaration

- I understand that participating in the Venus Bay Surf Life Saving Club IRB Camp may involve running, swimming, surf craft handling and other basic fitness conditioning and I know of no reason why this should present any problems to the applicant unless acknowledged above in the medical information.
- I give permission to Venus Bay Surf Life Saving Club to act on my behalf in the case of medical assistance or treatment being required during the bronze camp. I authorise the person in charge to consent to any emergency medical treatment as deemed necessary and I further permit private transportation if required.

I HAVE READ AND UNDERSTAND THE ABOVE DECLARATION

Name (printed)
 Signature
 Date / /

This form must be signed and returned before attending the bronze camp conducted by Venus Bay Surf Life Saving Club Ltd.

Venus Bay IRB Driver/Crew Training Camp Program

Times	Wednesday 23/9	Thursday 24/9	Friday 25/9	Saturday 26/9	Sunday 27/9
Breakfast	Thursday: Flat water training @ Walkerville South All other training at Venus Bay pending weather conditions	8:00am	8:00am	8:00am	8:00am
Session 1 9am - 1pm		Pre-operation checks Launching IRB and crewing positions Manoeuvring IRB in flat water/small surf	Launching IRB and crewing positions Negotiating the surf Parallel Running	Patient pickups Patient Carry Solo Driving	Assessment 10am - 2pm approx
Lunch 1pm - 2pm		<i>Salad Rolls</i>	<i>Salad Rolls</i>	<i>Salad Rolls</i>	<i>Salad Rolls</i>
Session 2 2pm - 5pm		Manoeuvring IRB in small surf Patient pickups Solo Driving Post-operation checks	Patient pickups Towing Capsized IRB Motor restart procedure	Search and Rescue Procedures Solo Driving	Clean and pack up
Dinner 5pm - 7pm		<i>Bolognese</i>	<i>BBQ</i>	<i>Lasagne</i>	
Session 3 7pm - 9pm		6pm Start Welcome & Introduction Unit 4: IRB Operations Launching IRB and crewing positions	Unit 2: Preparing for boat operations Unit 4: IRB Operations Boat Maintenance	Unit 1: Navigation Unit 3: Search and rescue operations Motor Maintenance	

Boat operator licence fees

Licence fees

Licence type	1 Year	3 Years	5 Years
General Operator Licence	\$29.20	\$87.60	\$146.00
Personal watercraft (PWC) endorsement on general operator licence	\$5.10	\$15.30	\$25.50
Combined General Operator licence with PWC endorsement	\$34.30	\$102.90	\$171.50
Restricted Operator Licence	\$14.60	\$43.80	\$73.00
Personal watercraft (PWC) endorsement on restricted operator licence	\$2.50	\$7.50	\$12.50
Combined Restricted Operator licence with PWC endorsement	\$17.10	\$51.30	\$85.50
Replacement Licence	\$18.20		

Boat operator test fees

Test type	Requirements	Total cost
Boat operator licence knowledge test	Operator licence knowledge test	\$22.80*
Boat operator personal watercraft endorsement test	Boat operator personal watercraft endorsement test (no appointment fee)	\$22.80
Combined boat and personal watercraft endorsement test	Combined boat and personal watercraft endorsement test (no appointment fee)	\$22.80
Boat and/or personal watercraft test, paper based or after hours	Boat and/or personal watercraft test, paper based or after hours (no appointment fee)	\$22.80

*Please note that if both the boat operator licence test and personal watercraft endorsement test are attempted on the same day then only one fee is charged (\$22.80)



APPLICATION FOR MEMBERSHIP

20__ / 20__ SEASON

1. CLUB NAME _____ SLSC _____

2. GENERAL DETAILS
 I hereby apply for membership of SLSA. I have read, understood, acknowledge and agree to the declaration and application over leaf. I have signed that declaration and application.

INITIAL MEMBERSHIP RENEWING

TITLE ____ (Mr, Mrs, Ms, etc) FIRST NAME _____ SECOND INITIAL ____ LAST NAME _____

MALE FEMALE DATE OF BIRTH ____ / ____ / ____ OCCUPATION _____

ADDRESS _____ POSTCODE _____

PHONE: HOME _____ BUSINESS _____ FAX _____

MOBILE _____ PREFERRED CONTACT NUMBER NO B / H / M EMAIL _____

Drivers License License Number _____ Vehicle Type _____ Exp Date _____

Shirt Size (Please Circle) 6 / 8 / 10 / 12 / 14 / XS / S / M / L / XL / 2XL / 3XL / 4XL / 5XL

Short Size (Please Circle) S / M / L / XL / 2XL / 3XL / 4XL / 5XL

3. MEMBERSHIP DETAILS APPLIED FOR – SUBJECT TO CLUB ENDORSEMENT (Tick one box only)

PROBATIONARY.....	<input type="checkbox"/>	ACTIVE (18 years and over).....	<input type="checkbox"/>	ASSOCIATE.....	<input type="checkbox"/>
JUNIOR ACTIVITY MEMBER (5-13 years).....	<input type="checkbox"/>	AWARD MEMBER.....	<input type="checkbox"/>	LIFE MEMBER.....	<input type="checkbox"/>
CADET MEMBER (13-15 years).....	<input type="checkbox"/>	RESERVE ACTIVE.....	<input type="checkbox"/>	GENERAL.....	<input type="checkbox"/>
ACTIVE (15-18 years).....	<input type="checkbox"/>	LONG SERVICE.....	<input type="checkbox"/>	HONORARY.....	<input type="checkbox"/>

Date Joined _____ Competitive Rights with this club: YES NO Locker Number _____ Key No _____

Member Protection Form Completed? YES NO Membership Protection Number (where applicable) _____

4. OTHER SURF LIFE SAVING CLUB MEMBERSHIPS (Please attach list if more than two)
 _____ SLSC _____ SLSC _____

5. MEDICAL DETAILS
 If you suffer or you have suffered from any disease or any physical or mental disability (eg, epilepsy, diabetes or any permanent disability to a limb, eye or ear) likely to affect your efficiency as a Club member, it may affect your safety and the safety of the public. You should consult your medical practitioner and SLSA prior to commencing any surf lifesaving activity. You should take part in a Hepatitis B vaccination program.

HAVE YOU READ THIS SECTION? YES NO

6. EMERGENCY CONTACT
 FIRST NAME _____ LAST NAME _____
 RELATIONSHIP _____ ADDRESS _____ POSTCODE _____
 PHONE: HOME _____ BUSINESS _____ FAX: _____ MOBILE: _____

7. BACKGROUND DETAILS
 Are you from a culturally and linguistically diverse background? YES NO Cultural Background _____
 Do you use any languages other than English in your home? YES NO Second Language _____
 Are you of Aboriginal descent? YES NO Are you of Torres Strait Islander descent? YES NO

8. DECLARATION I have read, understood, acknowledge and agree to the declaration and application and conditions of membership over leaf. I have signed that declaration and application. I warrant that all information provided is true and correct.
 SIGNATURE _____ DATE: _____

9. PARENT/LEGAL GUARDIAN CONSENT (IN RESPECT TO AN APPLICANT UNDER THE AGE OF 18 YEARS)
 I have read, understood, acknowledge and agree to the declaration and application and conditions of membership overleaf and I personally consent to the declaration and application for Membership of the applicant.
 FIRST NAME _____ LAST NAME _____
 SIGNATURE _____ DATE _____

10. OFFICE USE ONLY
 Date Application received ____ / ____ / ____ Amount paid: \$ _____ Receipt No. _____
 Accepted / Rejected by Club Management – Date ____ / ____ / ____ Signature of Club Officer _____
 Membership Category allocated _____ Capitation/Membership No. _____ ID Sighted – Type _____ Date _____

SLSA MEMBERSHIP APPLICATION & DECLARATION

I [insert name] of [insert address]..... hereby apply for membership of SLSA. In consideration of my application for membership being accepted I **acknowledge and agree** that:

- 1. In this membership declaration: "Claim" means and includes any action, suit, proceeding, claim, demand, damage, penalty, cost or expense however arising including but not limited to negligence BUT does NOT include a claim against SLSA by any person entitled to make a claim under a relevant SLSA insurance policy or under the SLSA Constitution or SLSA Regulations. "SLSA" means Surf Life Saving Australia Limited. "SLS Organisations" means and includes SLSA, its subsidiaries, its members (including State Centres & Clubs), Branches and their respective directors, officers, members, servants or agents. "SLS Activities" means performing or participating in any capacity in any authorised or recognised SLSA activity.
2. If my application for membership is accepted I will be a member of [Insert Club]..... SLSC, [insert Branch if relevant]....., [insert State]..... State Centre & SLSA. I acknowledge my application will be deemed to be accepted upon my participation in SLS Activities and I acknowledge that I will be bound by and agree to comply with the constitutions, regulations and policies of the SLS Organisations. These rules are necessary and reasonable for promoting SLSA and surf lifesaving as a community service.
3. Warning: SLS Activities can be inherently dangerous. I acknowledge that I am exposed to certain risks during SLS Activities including but not limited to physical exertion, contact with surf lifesaving equipment, body contact and surf, sea and weather conditions. I acknowledge that accidents can and often do happen which may result in me being injured or even killed, or my property being damaged. I have voluntarily read and understood this warning and accept and assume the inherent risks in participating in SLS Activities.
4. Exclusion of implied terms: I acknowledge that where I am a consumer of recreational services, as defined by any relevant law, certain terms and rights usually implied into a contract for the supply of goods and services may be excluded. I acknowledge that these implied terms and rights and any liability of the SLSA Organisations (or any of them) flowing from them, are expressly excluded to the extent possible by law, by this membership declaration. To the extent of any liability arising, the liability of the SLS Organisations will, at the discretion of the relevant SLS Organisation, be limited to the resupply of the services or the payment of the cost of having the services supplied again.
5. Release & Indemnity: In consideration of SLSA accepting my application for membership I: (a) release and will release the SLSA Organisations from all Claims that I may have or may have had but for this release arising from or in connection with my membership and/or participation in any SLSA Activity; and (b) indemnify and will keep indemnified the SLSA Organisations to the extent permitted by law in respect of any Claim by any person arising as a result of or in connection with my membership and/or participation in any SLSA Activity.
7. Fitness to Participate: I declare that I am medically and physically fit and able to participate in any SLSA Activity. I am not and must not be a danger to myself or to the health and safety of others. I will immediately notify SLSA in writing through my Club of any change to my medical condition, fitness and ability to participate.
8. Privacy: I understand that the information that I have provided over leaf is necessary for the Objects of the SLS Organisations. I acknowledge and agree that the information will be disclosed to my Club and State Centre and will only be used for the Objects of the SLSA Organisations and to provide me with membership services. I understand that I will be able to access my information through my Club. If the information is not provided my membership application may be rejected. I acknowledge that the SLSA Organisations may also use my personal information for the purposes of providing me with promotional material from SLSA Organisation sponsors or third parties. I may advise my State Centre if I do not wish to receive from the SLSA Organisations, any sponsor or third party material.
9. I have provided the information required overleaf and signed both sides of this form. I warrant that all information provided is true and correct. I acknowledge that this membership declaration cannot be amended. If I do amend it my application will be null and void and cannot be accepted by SLSA.
10. Severance: If any provision of this membership declaration is invalid or unenforceable in any jurisdiction, the phrase or clause is to be read down for the purpose of that jurisdiction, if possible, so as to be valid and enforceable. If the phrase or clause cannot be so read down it will be severed to the extent of the invalidity or unenforceability of it in any other jurisdiction. Such severance does not affect the remaining provisions of this membership declaration or affect the validity or enforceability of it in any other jurisdiction.

I have read, understood, acknowledge and agree to the above declaration including the warning, exclusion of liability, release & indemnity. I acknowledge that if my application for membership is successful I will be entitled to all benefits, advantages, privileges and services of SLSA membership.

Signed: Date:.....Name:

Where the applicant is under 18 years of age this form must also be signed by the applicant's parent or legal guardian.

I,..... am the parent or guardian of the applicant. I authorize and consent to the applicant undertaking the SLS Activities. In consideration of the applicant's membership being accepted I expressly agree to be responsible for the applicant's behaviour and agree to personally accept in my capacity as parent or guardian the terms set out in this membership application and declaration including the provision by me of a release and indemnity in the terms set out above. In addition I agree to be bound by and to comply with the SLSA constitution and any regulations and policies made under it.

Parent's signature:..... Date:Name: (where applicant under 18 y.o)