



# CIRCULAR 1493

## October 2021

### Surf Sports Carnival Positions

**Audience:** Club Presidents, Directors of Administration and Directors of Surf Sports  
**Date:** 12 October 2021  
**Contact:** Julie-Ann – Support Officer  
Phone: 4353 0299  
Email: [support@slscc.com.au](mailto:support@slscc.com.au)

<b>Summary</b>	<b>SLSCC is calling for interested members to nominate for Surf Sports Carnival positions for the 2021/2022 season</b>
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Surf Life Saving Central Coast Board of Surf Sports invites interested members to nominate for the following carnival positions:

- SEMC (Safety and Emergency Management Coordinator) there will be a course needed to do prior to this appointment.

Need a SEMC for each event - Junior, Opens/Masters, NPJIP, Boats, Board and Ski

- Water Safety Coordinator
- Power Craft Coordinator
- Scrutineer Coordinator
- Carnival Announcer
- Referee Steward – Juniors
- Referee Steward – Opens/Masters

It is important that these positions are filled to ensure the smooth operations of our surf sports carnivals and events in 2021-2022

Please complete the nomination form below and return to [support@slscc.com.au](mailto:support@slscc.com.au) by 11am on Tuesday 9<sup>th</sup> November 2021

For any additional information then please contact Julie-Ann on 43 53 0299

Kind Regards

David Unger  
Director of Surf Sports

## SLSCC Surf Sports Positions Nomination Form

**Position:** *Tick the box for the position that you wish to nominate for ✓*

<input type="checkbox"/> SEMC Boats	<input type="checkbox"/> SEMC Junior	<input type="checkbox"/> SEMC Opens/Masters
<input type="checkbox"/> SEMC NPJIP	<input type="checkbox"/> SEMC Board and Ski	<input type="checkbox"/> Scrutineer Coordinator
<input type="checkbox"/> Carnival Announcer	<input type="checkbox"/> Water Safety Coordinator	<input type="checkbox"/> Power Craft Coordinator
<input type="checkbox"/> Referee Steward – Masters	<input type="checkbox"/> Referee Steward – Opens	<input type="checkbox"/> Referee Steward – Juniors

**Personal Details:**

<b>Club:</b>	
<b>Name:</b>	
<b>Postal Address:</b>	
<b>E-mail Address:</b>	
<b>Phone:</b>	<b>Mob:</b>

**Qualifications (specific to the position for which you are nominating)**

Surf Official Level One	Date of award: ___ / ___ / ___.
Surf Official Level Two	Date of award: ___ / ___ / ___.
Surf Official Level Three	Date of award: ___ / ___ / ___.

**Relevant Experience:**

Level	Position	No. of Seasons	Dates
Club			
Branch			
State			
National			

Nomination must be signed by <b>Club Executive</b> member			
I certify that _____ is a member of _____ and that this application has the endorsement of the club.			
Name:		Signed:	
Position:		Date:	

*Signature of applicant* \_\_\_\_\_ *Date* \_\_\_\_\_

In signing this form I acknowledge that:

- The information in this application is accurate to the best of my knowledge.
- This is a nomination form and does not guarantee selection.
- If selected, photographs may be taken of me during operations & used at a later time for marketing and promotional purposes.
- No further permission will be required by SLSCC.

#### Privacy Act Information

**By submitting this form you are:**

1. Consenting to Surf Life Saving Central Coast using these details for the purpose of administration.
2. Acknowledging your right to access, and if necessary correct this information in accordance with the Privacy Act, and subsequent amendments.

**Return completed application:**

**Email:** [support@slscc.com.au](mailto:support@slscc.com.au)