

SLSWA MEMBER EDUCATION

ASSESSOR SHIRT & BADGE REQUEST FORM

Assessor Shirts & Badges are provided to qualified, proficient Assessors/Facilitators conducting assessments in the Member Education area of SLSWA

RTO Coordinator – SLSWA

E: kbarker@mybeach.com.au; F: 9243 9444; P: PO Box 382, North Beach, 6920

PLEASE PRINT CLEARLY

FULL NAME		SURFGUARD NO.	
CLUB		MOBILE	
EMAIL			
DELIVERY	<input type="checkbox"/> Pick Up You will be contacted when order is ready to be picked up	<input type="checkbox"/> Surf Club (Ensure Club is listed above)	
	<input type="checkbox"/> Home Delivery Street Number: _____ Street Name: _____ Suburb: _____ Post Code: _____		
QUALIFICATION/ PROFICIENT	<input type="checkbox"/> Assessor Qualification (3 Units of Competency) <input type="checkbox"/> Certificate IV Training & Assessment <input type="checkbox"/> Currently Proficient		
ASSESSOR SHIRT REQUEST		<input type="checkbox"/> New Assessor	<input type="checkbox"/> Replacement
Please select your shirt size:			
<input type="checkbox"/> XS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL			
BADGE REQUEST		<input type="checkbox"/> New Assessor	<input type="checkbox"/> Replacement
Name to be printed:			
First Name _____ Last Name _____			
OFFICE USE ONLY			
Order Received: _____ <input type="checkbox"/> Qualifications <input type="checkbox"/> Proficient Date: _____			
SHIRT: <input type="checkbox"/> In Stock <input type="checkbox"/> A/F Notified <input type="checkbox"/> Delivery <input type="checkbox"/> Back Order Due: _____ Rec. _____			
BADGE: <input type="checkbox"/> A/F Notified <input type="checkbox"/> Delivery <input type="checkbox"/> Back Order Due: _____ Rec. _____			
ORDER COMPLETED: _____ Recorded: _____			