



Youth Officials – Registration Form

Thank you for showing an interest in SLSWA Youth Official Program. To register for the program please complete this form digitally or by using black or blue pen and printing in block letters.

Participant's Name: _____

Participant's Club: _____

Participant's current age group: U/14 U/15 U/16 U/17

Participant's Address: Number & Street Name (or PO Box)

Suburb: _____ Postcode: _____

Participant's Signature: _____ Date: _____

Key
LN = Little Nippers – 6:30am – 11:00am
N = Nippers – 7:00am – 2:00pm
R = Round
MQ = Metro Qualifier
c = Country
C = Championships
Note: 13/03/20 – 4:30pm – 9:00pm

Events I will attend and officiate at			
Date	Event	Venue	Tick
15/12/19	NR1	Sorrento Beach	
12/01/20	LNR1	Coogee Beach	
19/01/20	NR2	City Beach	
25/01/20	LNC/Nc	Smiths Beach	
26/01/20	Nc	Smiths Beach	
9/02/20	LNR2	Leighton Beach	
15/02/20	NMQ	Mullaloo Beach	
16/02/20	NMQ	Mullaloo Beach	
1/03/20	NcC	Denmark	
8/03/20	LNC	Sorrento Beach	
13/03/20	NC	Scarborough Beach	
14/03/20	NC	Scarborough Beach	
15/03/20	NC	Scarborough Beach	

Parent: I have read the Introductory Letter from SLSWA regarding the Youth Officials Program and am happy for my daughter/son to register for this program. I will ensure they are at the events they have nominated.

Parent's Email: _____

Parent's Signature: _____ Date: _____

Completed Registration Forms to be sent to SLSWA	
via post	email
Member Development Officer Surf Life Saving WA PO Box 700 Balcatta, WA, 6914	Member Development Officer sclarke@slswa.com.au