

Memorandum



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| To: | Branch Directors of Member Services, Past Program Participants, Past Program Facilitators |
| From: | Naomi Stevenson, Member Services Officer |
| Date: | 9 January 2017 |
| Pages: | 1 page |
| Subject: | Development Program Facilitators |

Being a facilitator for a SLSNSW Development Program is a rewarding and enjoyable experience. Facilitators play an important role in the planning and delivery programs that are designed to develop and retain SLSNSW members. As a facilitator, you will:

- Get to work in a team of facilitators with your like-minded, energetic peers;
- Develop skills in public speaking and presenting;
- Hold a valuable leadership role, acting as a mentor to Surf Life Saving members; and
- Continue on your Surf Lifesaving pathway by sharing your passion and knowledge about Surf Life Saving with others.

We are currently seeking Development Program Facilitators for:

- **Junior Lifesaver of the Year Development Camp** (10th –13th April 2017, Collaroy Centre, Collaroy)
- **Youth Opportunity Makers Workshop** (10th –13th April 2017, Collaroy Centre, Collaroy)

Please note that all facilitators will be required from 2pm on Sunday 9th April for a program briefing and meet and greet session.

What does the role involve?

As a facilitator, you will be asked to:

- Assist with the implementation and evaluation of the program and associated activities;
- Mentor and act as a positive role model for participants;
- Work with, support and maintain open channels of communication with all facilitators;
- Be available for the **whole** duration of the program;
- Abide by the SLSA Code of Conduct; and
- Supervise participants.

Who can become a facilitator?

Members who:

- Are over 18 years of age and are a current Surf Life Saving member;
- Have previous involvement (either as a participant or facilitator) in club, branch or state development programs, or alternatively in community based programs;
- Are responsible and trustworthy;
- Work well in a team environment; and
- Hold a current Senior First Aid Certificate and/or Bronze Medallion.

The nomination process

If you interested in being a facilitator for our 2017 Development Programs, please complete the attached Facilitator Network Program application form and email it to Naomi Stevenson at nstevenson@surflifesaving.com.au by Thursday 9th February 2017.

Alternatively, if you are already a part of the Facilitating Network program, please email Naomi your expression of interest, including which Development Program/s you are interested in facilitating. All applicants will be contacted in late March 2017 to be advised about the status of your application.

If you have any questions about becoming a development program facilitator for Surf Life Saving NSW, please contact Naomi on (02) 9471 8034 or on the above email address.

Surf Life Saving New South Wales

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Fundraising Authority No. CFN11033 ABN: 93 827 748 379



NEW SOUTH WALES

Facilitator Network Program Application Form

Applicant Details

| | | | |
|---------|--|-------------|--|
| Surname | | Given Names | |
|---------|--|-------------|--|

| | |
|---------|--|
| Address | |
|---------|--|

| | | | |
|--------------|--|---------------|--|
| Phone Number | | Email Address | |
|--------------|--|---------------|--|

| | | | |
|-----------|--|-------------|--|
| Club Name | | Branch Name | |
|-----------|--|-------------|--|

| | | | |
|-----------------------------------|--|----------------------|---|
| Time involved in Surf Life Saving | | Age Group Preference | <input type="checkbox"/> 13- 14 years <input type="checkbox"/> 15-17 years <input type="checkbox"/> 18-25 years |
|-----------------------------------|--|----------------------|---|

| | | | | | |
|-----|--|-----|--|------|--------|
| DOB | | Age | | Male | Female |
|-----|--|-----|--|------|--------|

| | | | |
|-------------------|------------------|-----------------|-----------------|
| Ladies Shirt Size | 8 10 12 14 16 18 | Mens Shirt Size | XL S M L XL XXL |
|-------------------|------------------|-----------------|-----------------|

Experience / Interests

Please list any programs you have been a facilitator on:

What do you want to achieve in your role as a facilitator?

Why do you think you would make a good Development Program Facilitator?

Please list the awards you currently hold within SLS:

Please identify which areas of facilitating you enjoy / would be able to deliver:

| | | | |
|---------------------------|------------------------|---------------------------|---------------------|
| Small group activities | Large group activities | Ice Breakers | Team Building |
| Outdoor activities | Physical activities | High energy | Time fillers |
| Surf Life Saving Overview | IRB Crew / Drivers | Mentoring participants | Conflict resolution |
| Surf Sports | Education | Lifesaving | Support Operations |
| Member Services | Thinking on your feet | Behind the scenes support | Public Speaking |
| Other: | | | |

Club Endorsement

| | | | |
|---------------------|----------|--|-----------|
| CLUB NAME | | | |
| CLUB CONTACT | Name | | Signature |
| | Position | | Date |

Reasons for club endorsement/ comments :

Branch Endorsement

| | | | |
|-----------------------|----------|--|-----------|
| BRANCH NAME | | | |
| BRANCH CONTACT | Name | | Signature |
| | Position | | Date |

Reasons for branch endorsement/ comments:



NEW SOUTH WALES

Medical and Consent Form

SPECIAL REQUIREMENTS

Please identify any special needs or requirements (eg wheelchair access, food allergies etc)

MEDICAL INFORMATION

Do you suffer from any medical conditions? (eg allergies, epilepsy, asthma, diabetes etc)

Do you require medication for this condition?

If yes to either question – please give details (attached sheet if required)

RISK WAIVER

In the case of an emergency, I authorise the program staff where it is impractical to communicate with me, to arrange for me to receive such medical or surgical treatment as may be deemed necessary.

I understand that although Surf Life Saving NSW and its service providers attempt to minimise any risk of personal injury within practical boundaries, accidents do happen and all physical activities carry the risk of personal injury. I acknowledge and accept that there is an inherent risk of personal injury in physical activities that will be undertaken as part of the program.

Signature

Date

MEDIA CONSENT

I agree to allow Surf Life Saving NSW to use my name and any photographs, sound and film recordings taken of me at this program for the promotion of the organisations services and initiatives to the media and the general public.

Signature

Date

Privacy Statement

Surf Life Saving NSW, PO Box 307, Belrose NSW 2085 will collect and store the information you voluntarily provide to enable processing of enrolments for programs. The information will be provided to staff of the program and their facilitators where necessary and by providing this information you consent to this disclosure. Any information provided by you will be stored on a database that will only be accessed by authorised personnel and is subject to privacy restrictions. Any information provided by you to the organisation can be accessed by you during standard office hours, and updated by writing to us or by contacting us on 02 9471 8000.

SURF LIFE SAVING AUSTRALIA CODE OF CONDUCT

The Code of Conduct outlines the standard of conduct expected of all members. As a participant at this program, you agree to meet the following requirements in regard to your conduct during the program (including both formal and informal activities).

1. Respect the rights, dignity and worth of others
2. Be fair, considerate and honest in all dealings with others, and be a positive role model
3. Make a commitment to providing quality service
4. Be aware of, and maintain an uncompromising adherence to, SLSA standards, rules, regulations and policies
5. Demonstrate a high degree of individual responsibility, especially when dealing with persons under 18 years of age
6. Contribute to the provision of a safe environment for the conduct of all activities within surf lifesaving
7. Ensure that your actions are of the highest standard at all times, and that, at no time, will your conduct be construed as bringing SLSA or SLSNSW into disrepute

Further, you agree to:

- a. abide by the code of conduct outlined above
- b. maintain a 'duty of care' towards others and an accountability for matters relating to the program
- c. foster a collaborative approach to the program and its activities
- d. accept responsibility for your personal learning and that of the group
- e. be a positive role model for surf lifesavers and SLSA

Signature

Date