

## September 2017

**To:** Club Presidents, Secretaries, Directors of Surf Sports  
**From:** Keith Caldwell, Surf Sports Advisor  
**Date:** 1 September 2017  
**Subject:** 2017/18 Surf Sports Development Program

This season we are hoping to continue with the Development Program to assist our surf sports athletes from U12 age group through to Masters age groups. This program will be suitable for members interested in surf sports (surf & craft only) – beginners through to the more experienced are more than welcome.

The purpose of this program is to develop a surf sports program for participation by all 17 clubs in some capacity to improve surf sports skills, assist clubs in the new Coaching Framework Program (develop more coaches at grass roots level) and produce quality/depth of athletes capable of making representative teams). It's also about meeting new friends and becoming better lifesavers for the future. It is really hoped that clubs that have kids doing surf sports support this program. Surf Life Saving Illawarra have tried to implement days that hopefully don't interfere with any club training.

The program will be led by 3 experienced surf life savers;  
Scott Jones – Head Coach formerly at Queenscliff & Newport Surf Life Saving Clubs now at Bulli Surf Life Saving Club  
Keith Caldwell - Level 3 Surf Sports Manager, managing New South Wales & Australian teams & also a club coach  
Jake Hogarth – Club Coach assisting with training programs & Water Coach with the Illawarra Inter-Branch Team

- Special guest coaches will also assist during the course of the season

Parents will be required to assist with water safety duties and clubs will also have the opportunity to send their coaches along to participate in this program.

### Program:

#### **Development Program**

Running from September/April leading into major championships

Water based (craft) starts **Monday 4 September 4.30pm @ Wollongong Harbour (Belmore Basin on the beach).**

It will continue in September then on Monday/Wednesday 4.30pm both sessions at Wollongong Harbour.

October sessions will be Monday at Wollongong Harbour & Wednesday at Bulli SLSC. This will be the first 8 weeks cycle of training leading into 1<sup>st</sup> round of Sydney Water Surf Series.

Once athletes are registered into the program (financial) further sessions will be advertised.

### Cost:

A participant levy will apply to help fund the program;

- **Season Development Program (water based) cost \$100 one off payment for season**

Registration & Payment Forms for the program are attached. Completed registration form & payment is required by 31<sup>st</sup> October. Email the forms to Amy Vella (Executive Officer) Surf Life Saving Illawarra [eo@sillsillawarra.com.au](mailto:eo@sillsillawarra.com.au)

All participants must be a proficient, financial, competition member of a surf lifesaving club for season 2017-2018. Members competing out of the area may enquire and each application will be considered on its merits and there will be a greater financial commitment (TBC).

Any further enquiries contact Keith Caldwell [mkcaldwell@bigpond.com](mailto:mkcaldwell@bigpond.com) or 0414 258 295 (Surf Sports Advisor Surf Life Saving Illawarra).

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**Surf Life Saving Illawarra**

64 Smith Street, Wollongong; PO Box 6, Wollongong East NSW 2500 Australia

T +61 2 4228 3884 E [office@sillawarra.com.au](mailto:office@sillawarra.com.au)

Fundraising Authority No. CFN11033 ABN: 21 454 483 516



## 2017-2018 Surf Sports (Surf/Craft only) Development Program Registration and Medical Form

Name: \_\_\_\_\_ Age: \_\_\_\_\_

(Please Circle): Male/Female Surf Club: \_\_\_\_\_ Competition Age group (2017-2018): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

If under 18, please put parents details

Emergency contact: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone \_\_\_\_\_

- **Have you ever had or do you currently suffer from:**

High Blood Pressure, High cholesterol, Rheumatic Fever, Liver/Kidney condition, Diabetes or Epilepsy? **YES/NO**

Please Specify: \_\_\_\_\_

- **Do you have any heart problems, any family history of heart disease or stroke? YES/NO**

Please Specify: \_\_\_\_\_

- **Have you had any breathing difficulties or asthma, major injuries, regular headaches, cold, flu? YES/NO**

Please Specify: \_\_\_\_\_

- **Are you taking any medication? YES/NO**

Please Specify: \_\_\_\_\_

- **Is there anything else that you may want us to know? YES/NO**

Please Specify: \_\_\_\_\_

**WAIVER:** Although all care is taken during training sessions, the program organizers and assistants will not be held responsible for any injuries arising from the program. I hereby give my *CONSENT* for my son/daughter (named above), to participate in the SLSI Development Program. I also understand that surf conditions may force a change in venue for safety reasons. My son/daughter is a current financial member of their club. I have read and understood all the information on this form and have answered each question to the best of my knowledge.

**PARTICIPANT/PARENT/GUARDIAN:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ENDORSEMENT BY CLUB OFFICIAL:** \_\_\_\_\_ **Position:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return nomination form to:**

**Email:** [eo@sillawarra.com.au](mailto:eo@sillawarra.com.au)

**Office:** Surf Life Saving Illawarra, 64 Smith St Wollongong

**Postal:** PO Box 6 Wollongong East NSW 2520

Please note that an email will be forwarded to you on confirmation of your place in the program.

Please submit one form per participant

*Cost \$100 per person for water-based program*

*(to be paid on confirmation of program)*

For further details please contact SLS Illawarra Surf Sports Advisor Keith Caldwell [mkcaldwell@bigpond.com](mailto:mkcaldwell@bigpond.com) or 0414 258 295

**ALL PARTICIPANTS DOING WATER-BASED ACTIVITIES MUST BRING  
THEIR OWN HI VIS RASH VEST AND BOARD.**



**ILLAWARRA**  
NEW SOUTH WALES

## PAYMENT/TAX INVOICE

This document becomes TAX INVOICE upon payment.  
Please photocopy and maintain for your records

### **SURF SPORTS DEVELOPMENT PROGRAM 2017-2018**

First Name		Surname	
Address			
Suburb		Post Code	
Phone (h)		Mobile	
Email			
Club	Please circle U12-U13-U14-U15-U17-U19-Open-Masters		
<b>PAYMENT (\$100 per person) Cheque, cash and credit card</b>			
Credit Card	go to <a href="http://pay.slsa.com.au">pay.slsa.com.au</a> and follow instructions for club/service enter Illawarra Branch transaction type: levy		
CASH/CHEQUE	Call into SLS Illawarra office at 64 Smith St Wollongong Or post to: SLS Illawarra PO Box 6 Wollongong East NSW 2520		

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