



**NOOSA HEADS SURF LIFE SAVING CLUB
SURF SPORTS – SWIM SUBSIDY APPLICATION & AGREEMENT**

I _____ confirm that I will be representing
(Applicants name)
Noosa Heads SLSC in competitions during the 2010/2011 season.

Competition age group: _____

Phone: _____

Email: _____

I respectfully request a swim fee subsidy for the period from ___/___/_____ to ___/___/_____.

My squad fee is \$_____ per pass.

Pass type:

- 10 visit
- 20 visit
- Monthly
- Quarterly
- Other (please specify) _____

I intend to compete in the following events throughout the season:

- Dolphin Classic
- Coolangatta Gold
- Coffs Harbour Carnival
- Australian Championships
- Queensland State Championships
- Local Open and or Master Surf Carnivals
- Ocean 38
- Sunshine Coast Branch Championships
- Pool Rescue Championships
- Ocean Assault

I agree to undertake a minimum of 12 squad swimming sessions per month and will provide evidence of my attendance, signed by my coach, _____, at the end of each month for the period outlined (as above).
(Coach's name)

I have read and understand the Noosa Heads SLSC Competitors Handbook and Members Handbook.

I understand that if I don't fulfil the above obligation or if I breach the Club Subsidy Policy my application can be revoked.

I agree that if granted the subsidy I will undertake all my obligations to the best of my ability and will advise the Noosa Heads SLSC Head Coach of any changes as soon as possible.

Applicant signature: _____ Date: ___/___/_____

Parent/Guardian signature (if under 18): _____ Date: ___/___/_____

Office use only	Accepted/rejected
Club Officer: _____ Signature: _____	
Date: ___/___/_____ Subsidy amount per month: \$ _____	
Comments: _____	