



LIFESAVING SOCIETY®

NLS COMMITTEE MEMBER APPLICATION

The Lifeguarding Experts

Name		
Address		
City	Province	Postal Code
Home Ph		Work Ph
E-mail		Birthdate

LIFESAVING SOCIETY CERTIFICATIONS

NLS:

Pool Option

Waterpark Option

Waterfront Option

Surf Option

NLS Instructor

NLS Recert Conductor

NLS Instructor-Trainer

Lifesaving Instructor-Trainer

First Aid Instructor

AREAS OF INTEREST

Research

Policy Development

Standards

Instructor Development

Lifeguard Competition

Resource material design

Cultural Diversity

Other _____

What value do you feel you can contribute to the NLS Committee?

What change(s) do you think the NLS Committee can make to improve the quality of instruction in our Branch?

What would you like to get out of your experience as a member of the NLS Committee?

What previous volunteer experience do you have with the Lifesaving Society?

I have read the NLS Committee Terms of Reference and I understand the responsibility of becoming a member of the NLS Committee.

Signature

Date

Thanks for your interest!