# NATIONAL BEACH LIFEGUARD QUALIFICATION

## COURSE APPLICATION FORM

Please fill in clearly in BLOCK CAPITAL LETTERS

NAME ……

ADDRESS……
……..
……..…
……

* **PLEASE TICK BOX AS APPROPRIATE**

| | |
|---|---|
| NEW CANDIDATE | YES/NO |
| RENEWAL CANDIDATE | YES/NO |
| EXPIRED RENEWAL CANDIDATE | YES/NO |

WORK TEL. NO……

HOME TEL. NO……

**MEMBERSHIP NUMBER** _____

* MUST BE FILLED IF A RENEWAL OR 'EXPIRED REWNEWAL' CANDIDATE
EXPIRY DATE OF QUALIFICATION / /

E-MAIL ADDRESS……

MOBILE TEL.NO……..

I UNDERSTAND THAT ALL FEES MUST BE PAID IN ADVANCE OF THE COURSE.

*** DATE OF BIRTH / / *(Must be filled in)**

Life Saving Awards Held
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Date Award Taken
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Lifeguard Awards Held
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.....

Date Award Taken
……
……

Other Awards Held (First Aid etc.,)
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.....

Date Award Taken
…….....
……

Previous and Present Employment Experience of Lifesaving/Lifeguarding
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.....
……

**I wish to make application to join a course leading to the National Beach Lifeguard Qualification. I understand that attendance at the course in itself is no guarantee of achieving the qualification. I understand that independent assessment will take place on the completion of the course to determine my success or otherwise.**

**I have recently trained in a swimming pool for this qualification and my consistent average time for swimming 400 metres (non-stop) in front crawl is _____ I am aware that I must swim 400 metres (Front Crawl) in 8 Minutes or less to qualify in the swimming pool section of the assessment.**

**This form must be completed and duly signed by the candidate.**

**Applicant's Ordinary Signature**_____

*Additional information on all aspects of the NBLQ may be had by visiting* **www.lifeguardsireland.com**

Ref: C:\Documents and Settings\My Documents\Lifeguards Ireland FOLDERS\Lifeguards Ireland (Z1)\Beach LG Course\nblq_application_07.doc