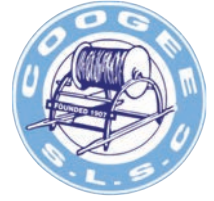


Coogee Surf Life Saving Training Program Registration Form

This form is to register for the Surf Life Saving Training Program with the Coogee Surf Life Saving Club. Please complete this form and return it to info@mdnsw.org.au.

For any further questions, you can contact us at (02) 9888 5711 or via info@mdnsw.org.au.



PARTICIPANT DETAILS

First name: Last name:

Date of birth: Gender: Mobile:

Email:

Type of neuromuscular condition:

Do you have a secondary disability? Yes No *If yes, please provide details:*

.....
.....

EMERGENCY CONTACT DETAILS

First name: Last name:

Relationship to participant: Mobile:

Email:

Would you be willing to be part of beach patrol duty? Yes No

MOBILITY

Do you use a mobility aid? Power chair Manual chair Scooter

Other (please specify)

Is the mobility aid used full time or part time? Full time Part time *Please provide details:*

.....
.....

Can you walk with or without assistance? With assistance Without assistance *Please provide details:*

.....
.....

Are you prone to falling? Yes No *If yes, please provide details:*

.....
.....

Can you transfer in and out of your chair? Yes No *Please provide details:*

.....
.....

Do you require a hoist for transfers? Yes No *If yes, please provide details:*

.....
.....



Signature: Date: