

Describe the peril of the person(s) rescued: _____

Describe the actions taken by the applicant: _____

****Please attach news clippings, photos, videos, report or other materials to aide in describing this incident****

| | | |
|---|----------------------|-------------|
| <u>Submitted by:</u> | | |
| Name: _____ | Phone: (_____) _____ | |
| Region: _____ | Chapter: _____ | |
| Signature: _____ | Date: _____ | |
| ----- | | |
| <u>Action Taken by Regional Committee</u> | | |
| <input type="checkbox"/> Approved for (category): _____ | | |
| <input type="checkbox"/> Rejected | Signature: _____ | Date: _____ |
| ----- | | |
| <u>Action Taken by National Committee</u> | | |
| <input type="checkbox"/> Approved for (category): _____ | | |
| <input type="checkbox"/> Rejected | Signature: _____ | Date: _____ |

Return to: **United States Lifesaving Association
Awards & Special Presentations Committee
P.O. Box 366
Huntington Beach, CA 92648**