

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

Describe the actions taken by the applicant: _____

Please attach additional pages as needed, news clippings, photos, video links, reports or any other materials to aide in describing this incident

Application Submitted by:

Name (Print Clearly): _____ Phone : (_____) _____
Region: _____ Chapter: _____
Signature: _____ Date: _____

**** FOR COMMITTEE USE ONLY ****

Initial Submission to Region received by: _____ Name: _____ Date: _____
 Forwarded to USLA Committee by: _____ Name: _____ Date: _____

Action Taken by Regional Committee

Approved for (category): _____
 Rejected Name: _____ Date: _____

Action Taken by National Committee

Approved for (category): _____
 Rejected Name: _____ Date: _____

Award Created Award Presented Date: _____

RETURN THIS APPLICATION TO:



VIA US POSTAL SERVICE

California Surf Lifesaving Association
Awards & Special Presentations Committee
P.O. Box 366
Huntington Beach, CA 92648

VIA E-MAIL DIRECTLY TO COMMITTEE

awards@cslsa.org