LIFESAVING SOCIETY®
SOCIÉTÉ DE SAUVETAGE
The Lifeguarding Experts
Les experts en surveillance aquatique

LIFESAVING SOCIETY – MANITOBA
100 – 383 Provencher Blvd
Winnipeg MB R2H 0G9
Ph (204) 956-2124 Fax (204) 944-8546
Email: aquatics@lifesaving.mb.ca

RESCUE AWARD NOMINATION

Nominated Rescuer's full legal name: (print clearly)

☐ **Mr.** ☐ **Mrs.** ☐ **Miss** ☐ **Ms.** _____

Address: _____
Street

_____
City Province Postal Code

Contact Numbers: (H) _____ **(W)** _____

Certificate to read in: ☐ **English** ☐ **French** **(please check one)**

Name to appear on Certificate: _____

Rescuer's Lifesaving/Swimming Level: _____
(If applicable)

Rescuer's Age: _____ **Date of Rescue:** _____ **Time of Day:** _____
(As of today)

Location of Incident: _____ **Weather Conditions:** _____

Type and condition of water hazard: _____

_____

_____

Complete description of the rescue:(include specific techniques used and procedures followed)

_____

_____

_____

_____

_____

_____

_____

_____

Complete description of rescue cont'd:

Rescued Person's Contact Information (if known): **Not Required**

Rescued person's full legal name: (print clearly): **Not Required**

☐ **Mr.** ☐ **Mrs.** ☐ **Miss** ☐ **Ms.** _____

Address: _____
Street

_____
City Province Postal Code

Contact Numbers: (H) _____ **(W)** _____

Signature of Nominator: _____ **Date:** _____

Contact Numbers: (H) _____ **(W)** _____