



Course Registration Form

IWS National Pool Lifeguard Award

This form should be completed and forwarded to IWS National Office at least 14 days in advance of the start date of a PLG course. Course Providers must forward details to relevant WSACs. (All providers/organisers must be IWS members) Fee: €30 per participant (New & revalidating), €20 per manual, (excl. €10.00 First Aid) plus postage. Certificates will not be issued until all invoices pertaining to courses are paid. Unfortunately we cannot accept returns.

(Please tick appropriate boxes)

National Pool Lifeguard Award or National Pool Lifeguard Award Revalidation

Level 1 (depth <= 1.5m)
(QQI Lvl 5 Shallow Water 5S18418)

or

Level 2 (depth > 1.5m)
(QQI Lvl 6 Deep Water 6S18422)

Organised by:

1. Water Safety Area Committee ***(must be minuted by WSAC Secretary)**

2. Other*: IWS Approved Provider IWS Approved In-House Provider

QQI Registered Provider

***Ensure valid IWS insurance for providers and examiners, or provide evidence of other insurance on registration**

Proposed starting date: _____

Proposed concluding date: _____

Course Organiser : _____

(Note: Invoice issued to Course Organiser)

Name of Course Providers: _____ Tel #: _____

_____ Tel #: _____

Name of Course Examiners: _____ Tel #: _____

_____ Tel #: _____

Number of candidates (New) _____ Number of PLG Manuals required: _____

Number of Candidates (Revalidating) _____ Number of First Aid manuals req.: _____

Shipment Address: _____

Phone No. _____ Fax No. _____ E-mail. _____

PO No. (If applicable) _____

Course Organiser Signature: _____

I agree to the management of my personal data in accordance with the General Data Protection Regulations (GDPR) 2018.

Number of Theory Hours: _____

Number of Practical Hours: _____

Total Number of Hours: _____

Pool Details Venue: _____

Max Pool Depth: _____ Other Pool Features: (e.g. Infant Pool, Slides) _____

Course approved? Yes/No

Lifeguard Commission Notified of Course? Yes/No

HQ use only

Signature: _____
Lt. Cdr. John F.M. Leech (CEO)

Date: _____

HQ use only

Is Course Provider Registered and Up to Date? Yes/No

Is Examiner a Registered Provider of the Course? Yes/No