

**INTERNATIONAL LIFE SAVING Federation**

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**MEMBERSHIP APPLICATION FORM**

1. **APPLICATION FOR MEMBERSHIP**

My Federation/Organisation applies for:

**Tick appropriate**

|  |  |
| --- | --- |
| **FULL MEMBERSHIP** |  |

*Full membership may be granted to a lawfully incorporated national non-profit organisation that is a leader or provider of drowning prevention, lifesaving and/or lifesaving sport activities in its Nation. Subject to the payment of the annual fee, designated representatives of Full Members have attendance and voting rights at Elective and Extraordinary General Assemblies, the right to nominate candidates to the Board of Directors, Commissions and Committees and such other rights and responsibilities as are set out in the Constitution and Bye-Laws. Only Full Members may compete in the ILS World Championships and may issue ILS recognised Certificates.*

|  |  |
| --- | --- |
| **ASSOCIATE MEMBERSHIP** |  |

*Associate membership may be granted to a lawfully incorporated national non-profit organisation that is a leader or provider of drowning prevention, aquatic lifesaving and/or lifesaving sport activities in its Nation. Subject to the payment of the annual fee, designated representatives of Associate Members may attend and, subject to the consent of the relevant meeting Chair, address an ILS meeting, but do not have the right to vote. Associate Members must pay 50% of the membership fees of a Full Member.*

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| **CORRESPONDING MEMBERSHIP** |  |

*Corresponding membership may be granted to a lawfully incorporated non-profit organisation that is a leader or provider of drowning prevention, aquatic lifesaving and/or lifesaving sport in its Nation. This status is not appropriate for Regional Branches of Full, Associate or Corresponding Members in a Nation. It may only be granted to Organisations that are independent of existing ILS Full, Associate or Corresponding members. Subject to the payment of the annual fee, designated representatives of Corresponding Members may attend and, subject to the consent of the relevant meeting Chair, address an ILS meeting, but do not have the right to vote. Corresponding Members must pay 10% of the membership fees of a Full Member.*

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| **PARTNER MEMBER** |  |

*Partnership status may be granted by the ILS Board of Directors to international corporations, non-profit organisations, government bodies, and educational and research institutes with a global interest in aquatic lifesaving, drowning prevention and/or lifesaving sport. Subject to the payment of the annual fee, designated representatives of Partners may attend and, subject to the consent of the relevant meeting Chair, address an ILS meeting, but do not have the right to vote. Partners must pay 20% of the membership fees of a Full Member.*

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| **INSTITUTIONAL MEMBER** |  |

*An Institution Member of ILS is one that supports the Vision, Mission and Strategic Goals of ILS and conducts research in the fields of drowning prevention, lifesaving and/or lifesaving sport. The Institution Member may be a private organisation, a semi-government or government agency or a not-for-profit organisation. Subject to the payment of the annual fee, designated representatives of Institutional Members may attend and, subject to the consent of the relevant meeting Chair, address an ILS meeting, but do not have the right to vote. Institutional Members must pay 20% of the membership fees of a Full Member.*

1. **INFORMATION ON APPLICANT ORGANISATION**

|  |  |
| --- | --- |
| Name in English |  |
| Name in your Official Language(s) |  |
| Official Languages(s) of your organisation |  |
| Abbreviation in English |  |
| Abbreviation in your Official Language(s) |  |
| Official Legal Name |  |
| Address (street and number) |  |
| Postal Code and City |  |
| Country |  |
| Telephone Number(s) |  |
| E-mail Address |  |
| Web site |  |

1. **SCOPE OF THE ORGANISATION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **01** | Is your Organisation a Recognised National Organisation?  *A lawfully incorporated non-profit organisation that is a leader or provider of drowning prevention, aquatic lifesaving and/or lifesaving sport activities in the full Nation.* |  |  |
| **02** | Is your Organisation a Recognised Non-National Organisation?  *A lawfully incorporated non-profit organisation that is a leader or provider of drowning prevention, aquatic lifesaving and/or lifesaving sport activities in certain states/provinces/regions/zones of the Nation.* |  |  |

1. **TYPE OF ORGANISATION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **03** | Is your Organisation a Private non-profit Organisation?  *A Private non-profit Organisation is a voluntary citizens' organisation. It is an organisation that is not created by a government. It is also not a business organisation. The profits of the organisation go to promoting the aims of the organisation, not to the government, shareholders or stakeholders.* |  |  |
| **04** | Is your Organisation a Governmental Organisation?  *A National Governmental Organisation is created and owned by the Government, where its leaders are appointed by the Government and not by a General Assembly of voluntary members. The profits of the organisation go to the Government, who can re-invest it in the organisation.* |  |  |
| **05** | Is your Organisation a Commercial Organisation?  *A Commercial Organisation is a company with the aim to generate profit. The company engages in some form of commercial activity, such as selling products or services, in exchange for payment. The profit is given to shareholders or stakeholders, but can also be re-invested in the company.* |  |  |
| **06** | Is your Organisation an Institution?  *An Institution is an organisation that supports the Vision, Mission and Strategic Goals of ILS and actively participates in drowning prevention activities. The Institution Member may be a private organisation, a semi-government or government agency or a not-for-profit organisation.* |  |  |

**Useful Information**

**Nation**

Nation means a member of the United Nations. In addition a geographic territory or region which is not part of a member of the United Nations but has certain aspects of self-government, at least to the extent of being autonomous in the control of its aquatic lifesaving/water safety activities and given the affiliation of the ILS with the International Olympic Committee (IOC), nations or territories formally recognised by the IOC, may be recognised as members of the ILS after the vote of the Board of Directors first and the final approval by the General Assembly for full membership.

**The following nations are considered by ILS as developing nations (Category C Membership)**

Afghanistan, Albania, Algeria, American Samoa, Angola, Antigua and Barbuda, Argentina, Armenia, Aruba, Azerbaijan, Bahamas, Bangladesh, Barbados, Belarus, Belize, Benin, Bermuda, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Brazil, British Virgin Islands, Burkina Faso, Burundi, Cambodia, Cameroon, Cape Verde, Cayman Islands, Central African Republic, Chad, Chile, Colombia, Comoros, Congo-Brazzaville, Congo-Kinshasa, Cook Islands, Costa Rica, Côte d'Ivoire, Cuba, Czech Republic, Djibouti, Dominica, Dominican Republic, Ecuador, Egypt, El Salvador, Equatorial Guinea, Eritrea, Estonia, Ethiopia, Fiji, Gabon, Gambia, Georgia, Ghana, Grenada, Guam, Guatemala, Guinea, Guinea Bissau, Guyana, Haiti, Honduras, Hungary, India, Indonesia, Iran, Iraq, Jamaica, Jordan, Kazakhstan, Kenya, Kiribati, Korea North, Kyrgyz Republic, Laos, Latvia, Lebanon, Lesotho, Liberia, Libya, Lithuania, Macau, Macedonia, Madagascar, Malawi, Maldives, Mali, Malta, Mauritania, Malaysia, Marshall Islands, Mauritius, Mayotte, Mexico, Micronesia Federal States, Moldova, Mongolia, Montenegro, Morocco, Mozambique, Myanmar, Namibia, Nauru, Nepal, Nicaragua, Niger, Nigeria, Northern Marianas Islands, Oman, Pakistan, Palau Islands, Palestine, Panama, Papua New Guinea, Paraguay, Peru, Philippines, Puerto Rico, Rwanda, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Samoa (Western), Sao Tome and Principe, Saudi Arabia, Senegal, Serbia, Seychelles, Sierra Leone, Slovak Republic, Slovenia, Solomon Islands, Somalia, South Africa, South Sudan, Sri Lanka, Sudan, Suriname, Swaziland, Syria, Tajikistan, Tanzania, Thailand, Timor-Leste, Togo, Tonga, Trinidad and Tobago, Tunisia, Turkmenistan, Tuvalu, Uganda, Ukraine, Uruguay, Uzbekistan, US Virgin Islands, Vanuatu, Venezuela, Vietnam, Yemen, Zambia, Zimbabwe.

**Membership Fees (2017-2020)**

Full Members normally pay the fee for Category B. A Full Member can choose to be upgraded to Category A and pay a higher fee. There is no difference between Categories A or B Full Members, except for the lower and higher fee. Only Full Members have voting rights.

* Full Member of Category A: 3.000 Euro per year.
* Full Member of Category B: 1.800 Euro per year.
* Full Member of Category C: The normal fee is 25% of the Category B fee or 450 Euro. New Category C nations pay a 150 Euro per annum for four years. The period can be extended upon request of the Region.
* Associate Member of Category B (50%): 900 Euro per year.
* Associate Member of Category C (25%): 225 Euro per year.
* Corresponding Member of Category B (10%): 180 Euro per year.
* Corresponding Member of Category C (25%): 45 Euro per year.
* Institution Member of Category B: 360 Euro per year.
* Institution Member of Category C: 90 Euro per year.
* Partner of Category B: 360 Euro per year.
* Partner of Category C: 90 Euro per year.

1. **CONSTITUTION**

|  |  |  |
| --- | --- | --- |
| **07** | In what year was your Organisation created/formed? |  |

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **08** | Does your Organisation have Statutes / Constitutions? |  |  |
| If **Yes**, please e-mail the Statutes / Constitution to the ILS Headquarters. | | |
| If **No**, please include the documents that detail how your Organisation is governed. | | |
| **09** | Does your Organisation have Bye-Laws / Operational Rules? |  |  |
| If **Yes**, please e-mail the Bye-Laws / Operational Rules to the ILS Headquarters. | | |
| If **No**, please include the documents that detail how your Organisation is governed. | | |

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **10** | Is your Organisation legally incorporated in your country? |  |  |
| If **Yes**, please e-mail the proof of Incorporation to the ILS Headquarters. | | |
| If **No**, please detail hereunder how your Organisation is recognised. | | |

1. **SCOPE**

|  |  |  |
| --- | --- | --- |
| **11** | How many States/Provinces are there in your country? |  |
| **12** | In how many States/Provinces is your Organisation active? |  |

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **13** | Are there any other national organisations involved in drowning prevention, water safety, aquatic lifesaving, lifeguarding in your country? |  |  |
| If **Yes**, please list: | | |

1. **NATIONAL RECOGNITION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **14** | Is your Organisation recognised by the Government? |  |  |
| If **Yes**, in what year did your Organisation become recognised by the Government? |  | |
| If **Yes**, under which Ministry(ies) is your Organisation recognised? | | |
| **15** | Is your Organisation recognised by the National Sport Council (if any)? |  |  |
| **16** | Is your Organisation recognised by the National Olympic Committee? |  |  |
| **17** | Is your Organisation recognised by the National Disaster Committee (if any)? |  |  |
| **18** | Is your Organisation recognised by the National University Regulator? |  |  |
| **19** | Is your Organisation recognised by another National Organisation(s)? |  |  |
| If yes, please name the Organisation(s): | | |

1. **SUBSIDIES**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **20** | Does your Organisation receive funding or grants from the National Government? |  |  |
| **21** | Does your Organisation receive funding or grants from a State/Provincial/ Regional/Local Government? |  |  |
| **22** | Does your Organisation receive funding or grants from the National Sport Council? |  |  |
| **23** | Does your Organisation receive funding or grants from the National Olympic Committee? |  |  |
| **24** | Does your Organisation receive funding or grants from other Organisations? |  |  |
| If yes, please name them: | | |

1. **NATIONAL AND INTERNATIONAL MEMBERSHIP**

|  |  |
| --- | --- |
| **YES** | **NO** |

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| --- | --- | --- | --- |
| **25** | Is your Organisation a member of any National Organisation(s) or umbrella group(s) / peak bodies? |  |  |
| If **Yes**, to which Organisation(s)? | | |
| **26** | Is your Organisation a member of another International Organisation? |  |  |
| If **Yes**, to which International Organisations is your organisation affiliated? | | |

1. **FIELDS OF ACTIVITIES**

Please tick hereunder the main fields of activities of your Organisation.

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **27** | * Lifesaving – Lifeguarding |  |  |
| * Water Rescue |  |  |
| * Volunteer Patrol |  |  |
| * Professional Patrol |  |  |
| * Management of Lifesaving Equipment |  |  |
| * Promotion of Public Awareness |  |  |
| * Research into lifesaving risk, techniques and effectiveness |  |  |

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| --- | --- | --- | --- |
| **28** | * Drowning Prevention |  |  |
| * Drowning Prevention Research |  |  |
| * Disaster Risk Reduction |  |  |
| * National or sub-national Water Safety planning |  |  |
| * Collation, analysis and reporting of Drowning Statistics |  |  |

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| **29** | * Lifesaving Sport |  |  |
| * Swimming Sport |  |  |
| * Fin Swimming Sport |  |  |
| * Other Sport |  |  |
| * Organisation and Management of Lifesaving Competitions |  |  |
| * Management of Lifesaving Athletes/Competitors |  |  |
| * Management of Lifesaving Referees/Judges |  |  |
| * Management of anti-doping in Lifesaving |  |  |
| * Management of Lifesaving Sport for Children – Youth – Juniors |  |  |
| * Management of Lifesaving Sport for Physical Disabled people |  |  |

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| --- | --- | --- | --- |
| **30** | * Lifesaving & Lifeguarding Education |  |  |
| * Cardio-Pulmonary Resuscitation (CPR) Education |  |  |
| * First Aid Education |  |  |
| * Oxygen Administration Education |  |  |
| * Automatic External Defibrillation (AED) Education |  |  |
| * Teaching of Swimming and Water Safety |  |  |
| * SCUBA Diving Instruction |  |  |
| * Other education (please detail) |  |  |

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| --- | --- | --- | --- |
| **31** | * Management of Finance & Administration |  |  |
| * Management of Fundraising, Marketing, Sponsoring |  |  |
| * Risk Management |  |  |
| * Promotion of Drowning Prevention, Lifesaving and/or Lifesaving Sport |  |  |
| * Production of Documentation (e.g. training manuals, guidelines, etc.) |  |  |
| * Management of Disciplinary Matters in the Organisation |  |  |
| * Management of Honours - Awards |  |  |
| * Management of Medical and Scientific aspects |  |  |
| * Other Management (please list) |  |  |

1. **GENERAL ASSEMBLY – GENERAL MEETING OF MEMBERS**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **32** | Does your Organisation have a General Assembly? |  |  |
| **33** | What is the frequency of the General Assembly (yearly, every two years, …)? |  | |
| **34** | Who is eligible to be a member of your General Assembly? | | |
| * Individuals representing State / Provincial / Regional bodies? |  |  |
| * Individuals representing Clubs? |  |  |
| * Individual Members? |  |  |
| * Others (please specify) |  |  |
| **35** | Who has voting rights at your General Assembly? | | |
| * Individuals representing State / Provincial / Regional bodies? |  |  |
| * Individuals representing Clubs? |  |  |
| * Individual Members? |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **BOARD OF DIRECTORS / EXECUTIVE COMMITTEE**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **36** | Does your Organisation have a Board of Directors / Executive Board / Board of Trustees? |  |  |
| **37** | If **Yes**, what is the total number of Board Members |  | |
| If **Yes**, how many members are elected |  | |
| If **Yes**, how many members are appointed |  | |
| If **Yes**, what is the total number of Women in the Board |  | |
| If **No**, describe how your Organisation is governed. | | |
| **38** | Describe how the Board Members are elected / appointed. | | |
| **39** | When was your last election of Directors? (year) |  | |
| When will be the next elections? (year) |  | |

Give hereunder the composition of the National Board of Directors (if any)

|  |  |  |  |
| --- | --- | --- | --- |
| **Function** | **FAMILY NAME, Forename** | **Gen- der** | **Telephone (T)**  **E-mail (E)** |
| President |  |  | T:  E: |
| Chairperson (if any) |  |  | T:  E: |
| Vice-President |  |  | T:  E: |
| Vice-President |  |  | T:  E: |
| Secretary General |  |  | T:  E: |
| Treasurer General |  |  | T:  E: |
| Others (please list other directors and their title) |  |  | T:  E: |
|  |  | T:  E: |
|  |  | T:  E: |
|  |  | T:  E: |

M= Male, F= is Female.

1. **WOMEN**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **40** | Are women represented on decision making bodies within your Organisation at the National level? |  |  |
| If **Yes,** please state what percentage (%) are females? | **… %** | |
| **41** | What is the highest position a female holds in your Organisation? | | |
|  | | |
| **42** | Are women represented on decision making bodies within your Organisation at State/Provincial/Regional or Local level? |  |  |
| If **Yes,** please state what percentage % are female? | | |
| State/Provincial level | **… %** | |
| Regional/Local level | **… %** | |

1. **COMMISSIONS / COMMITTEES / WORKING GROUPS**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **43** | Does your Organisation have commissions/committees/working groups? |  |  |
| If **Yes**, how many? |  | |
| If **Yes**, name them hereunder: | | |
|  | | |
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1. **BRIEF DESCRIPTION AND SHORT HISTORICAL OVERVIEW**

Please provide in maximum 40 lines a brief historical overview of your Organisation as well as current elements of interests (the text will appear on the internet to present your Organisation).

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| --- |
|  |

1. **LOGO**

Please provide hereunder and in digital format (high resolution) the logo of your Organisation.

|  |  |
| --- | --- |
| **LOGO IN COLOURS** | **LOGO IN BLACK AND WHITE** |

1. **SUB-STRUCTURES**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **44** | Does your Organisation have State/Provincial/Regional structures? |  |  |
| If **Yes**, how many? |  | |
| **45** | Does your Organisation have clubs? (1) |  |  |
| If **Yes**, how many? (give exact number) |  | |
| **46** | Does your organisation have any other structures?  (e.g. foundations, trading companies, chapters, agencies, …)? |  |  |
| If **Yes**, how many? |  | |

1. Please add the list of clubs with contact details in a separate document if available.
2. **INDIVIDUAL MEMBERS**

If no accurate figures can be given, please make the best possible estimation.

|  |  |  |
| --- | --- | --- |
| **Women** | **Men** | **Total** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **47** | How many individual members does your Organisation count? |  |  |  |
| **48** | How many from them participate in lifesaving sport (leisure or competition)? |  |  |  |

1. **ADMINISTRATION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **49** | Does your Organisation have a national headquarter? |  |  |
| **50** | Does your Organisation have state/provincial/regional/sub-national headquarters? |  |  |
| **51** | If **Yes**, how many state/provincial/regional/sub-national headquarters? |  | |
| **52** | How many paid staff does your Organisation have in total? |  | |

Please list senior employee(s) and specify title/function.

|  |  |  |
| --- | --- | --- |
| **Function** | **FAMILY NAME, Forename** | **Telephone (T) & E-Mail (E)** |
|  |  | T:  E: |
|  |  | T:  E: |
|  |  | T:  E: |

1. **FINANCES**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **53** | Please provide the total financial support that your Organisation is receiving from the Government per year in Euro. Make best estimate if you have no exact figures. | **... Euro** | |
| **54** | Do you receive fees from your Individual Members? |  |  |
| **55** | Do you receive fees from your States/Provinces/Regions |  |  |
| **56** | Do you receive fees from your Clubs? |  |  |
| **57** | Do you receive private donations? |  |  |
| If **Yes**, how many donors does your organisation have? |  | |
| **58** | Do you receive support from any Foundations? |  |  |
| **59** | Do you have any sponsors? |  |  |
| **60** | Do you provide any services which you charge for? |  |  |
| **61** | Do you have any trading activity? |  |  |

|  |  |  |
| --- | --- | --- |
| **62** | What % of your expenditure does your Organisation spend on: | **Percentage** |
| * Staff costs and salaries |  |
| * Administration including buildings, equipment, etc. |  |
| * Education |  |
| * Rescue Service |  |
| * Drowning Prevention |  |
| * Public Relations |  |
| * Lifesaving Sport |  |
| * Support to regions or clubs |  |
| * Youth work |  |
| * Meetings and Travel |  |
| * Others (please detail) |  |

|  |  |  |
| --- | --- | --- |
| **63** | In the last calendar year: | **Numbers** |
| How many individuals paid an annual fee to be a member of your Organisation? |  |
| How many individuals were certified by your Organisation in educational programmes, vocational training? |  |
| How many individuals participated in competitions sanctioned by your Organisation? |  |
| **64** | Give a global estimated figure of all people that obtained certificates and that are by one way or another involved or related to lifesaving since the start of your Organisation. |  |

1. **DROWNING PREVENTION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **65** | Does your Organisation support a national water safety plan? |  |  |
| **66** | Does your Organisation conduct national drowning prevention campaigns? |  |  |
| **67** | Does your Organisation conduct state, provincial, regional or sub-national drowning prevention campaigns? |  |  |
| **68** | Does your Organisation develop and/or deliver programmes to at-risk communities? |  |  |
| **69** | Does your Organisation conduct drowning prevention research? |  |  |
| **70** | Does your organisation assemble, analyse and report drowning statistics? |  |  |
| **71** | Does your Government, (all levels city/town, province/state, federal/ national) take an active role in drowning prevention? |  |  |

1. **LIFESAVING DEVELOPMENT**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **72** | Does your Organisation assist in the built-up and development of lifesaving organisations in countries other than your own? |  |  |
| If **Yes,** where and with whom? | | |
| **73** | Is your Organisation in a Category C nation (see list on page 3)? |  |  |
| If **Yes**, does your organisation need assistance? |  |  |
| If **Yes**, what assistance do you require? | | |

1. **LIFESAVING EDUCATION AND RESCUE**

|  |  |
| --- | --- |
| **YES** | **NO** |

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| --- | --- | --- | --- |
| **74** | Does the Government of your country have legislations / regulations / standards related to: | | |
| The operation of Swimming Pools? |  |  |
| The operation of Beaches? |  |  |
| The operation of Inland Bathing Zones? |  |  |
| The supervision of aquatic activities? |  |  |
| The educational/ training programmes of your lifesavers / lifeguards? |  |  |
| **75** | Is swimming a mandatory component of school based education in your Country? |  |  |
| **76** | Is water safety a mandatory component of school based education in your Country? |  |  |
| **77** | Does your Country have national standards of water safety signs? |  |  |
| **78** | Does your Country have a national standard for beach safety flags which are in use? |  |  |

|  |  |  |
| --- | --- | --- |
| **79** | Give an estimate on the numbers of patrolled bathing zones in your country: | **Numbers** |
| Number of Swimming Pools. |  |
| Numbers of Patrolled Beaches. |  |
| Number of patrolled Inland Bathing Zones. |  |
| Number of other patrolled zones of aquatic activities. |  |

**Paid Lifesavers/Lifeguards clothing colours**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **80** | Are lifesavers/lifeguards in your country **who are paid** for their work required to wear a red/yellow uniform whilst assigned to lifesaving duties? | | |
| When they are patrolling Beaches? |  |  |
| When they are patrolling Swimming Pools? |  |  |
| When they are patrolling Open waters? |  |  |
| If **No** but a uniform is worn, what are the colours used? | | |

**Volunteer Lifesavers/Lifeguards colours**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **81** | Are lifesavers/lifeguards in your country **who volunteer** their work required to wear a red/yellow uniform whilst performing lifesaving duties? | | |
| When they are patrolling Beaches? |  |  |
| When they are patrolling Swimming Pools? |  |  |
| When they are patrolling Open waters? |  |  |
| If **No** but a uniform is worn, what are the colours used? | | |

1. **LIFESAVING EDUCATION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **82** | Does your Organisation have formal lifesaving/lifeguarding educational resources (manuals, books, electronic media, etc.) that it uses for lifesaving/lifeguarding training? |  |  |
| Are these resources available for the ILS? |  |  |
| **83** | Is swimming ability a prerequisite to your lifesaving / lifeguarding courses? |  |  |
| **84** | How many teachers – instructors – examiners do your organisation count? |  | |

1. **LIFESAVING SPORT**

|  |  |
| --- | --- |
| **YES** | **NO** |

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| --- | --- | --- | --- |
| **85** | Does your Organisation conduct lifesaving competitions / sport? |  |  |
| If **Yes,** please indicate which of the following types of competition | | |
| * Pool competitions. |  |  |
| * Beach competitions. |  |  |
| * Ocean competitions. |  |  |
| * Open water/lakes competitions. |  |  |
| * SERC (Simulated Emergency Rescue Competition). |  |  |
| * Surfboats competitions. |  |  |
| * IRB (Inflatable Rescue Boats) competitions. |  |  |
| * March Past competitions. |  |  |
| * Resuscitation competitions. |  |  |
| * Long distance / Endurance competitions. |  |  |
| * Others: please specify. |  |  |
| **86** | Please detail which lifesaving competitions are organised by your Organisation? | **YES** | **NO** |
| * International Competitions. |  |  |
| * National Competitions. |  |  |
| * State/Provincial Competitions. |  |  |
| * Interclub Competitions. |  |  |
| * Club Competitions. |  |  |

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| --- | --- | --- | --- |
| **87** | Does your Organisation conduct lifesaving competitions for age groups (nippers, cadets, junior, youth, senior, pre-masters, masters, etc.)? |  |  |
| If **Yes**, please specify the name used in your country and the age limits: | | |

|  |  |  |
| --- | --- | --- |
| **88** | How many members take part in lifesaving as a sport/competition?  (give exact figure or make best estimate) | **Numbers** |
| * Men. |  |
| * Women. |  |
| **89** | How many formally recognised and/or accredited lifesaving coaches /trainers does your Organisation count (give exact figure or make best estimate)? | |
| * International level Coach / Trainer. |  |
| * National level Coach / Trainer. |  |
| * Club level Coach / Trainer. |  |
| **90** | How many formally educated technical officials (referees, judges, …) does your Organisation count (give exact figure or make best estimate)? | |
| * International level Technical Officials. |  |
| * National level Technical Officials. |  |
| * Club level Technical Officials. |  |

|  |  |
| --- | --- |
| **YES** | **NO** |

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| --- | --- | --- | --- |
| **91** | Does your Organisation have a National Team in Lifesaving that represents your Country in any International Lifesaving Competitions? |  |  |
| If **Yes**, at Youth/Junior level? |  |  |
| If **Yes**, at Senior level? |  |  |
| **92** | Does your Organisation have Masters that compete in the International Lifesaving Competitions? |  |  |
| **93** | Is Lifesaving as a Sport recognised by your National Government? |  |  |
| **94** | Has your Organisation a (strategic) plan for the development of the sport of lifesaving and competition in your country? |  |  |
| **95** | Do your Organisation have any adapted rules for conducting lifesaving competitions: for youngsters/juniors/youth/cadets? |  |  |
| * For Children (below 10 years)? |  |  |
| * For Youngsters (between 10-14 years)? |  |  |
| * For Juniors/Youth? |  |  |
| * For Seniors? |  |  |
| * For Masters? |  |  |
| **96** | Do you have athletes with disabilities competing in your competitions? |  |  |
| If **Yes,** have you modified the rules of competition to cater for athletes with disabilities? |  |  |
| **97** | Does your Organisation use the ILS Competition Rules as the basis for your national competition? |  |  |
| If **Yes**, are these rules also used in lifesaving competition at levels lower than "national" competition e.g.: Provincial / Club? |  |  |
| What % of your National Competition events is made up by events included in the ILS Competition Rules? | **… %** | |
| **98** | Does your Organisation have an approved Anti-doping policy? |  |  |
| If **Yes,** does your Anti-doping policy reflect the WADA anti-doping code? |  |  |
| **99** | Does your Organisation conduct Drug testing at your National Championships? |  |  |
| If **Yes,** which athletes do you test and how many tests are conducted? |  | |
| **100** | Are your athletes subjected to out-of-competition testing? |  |  |

1. **MISCELLANEOUS**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **101** | Are there any specific cultural, gender or other barriers to participation in your Organisation that you would like us to be aware of? |  |  |
| If **Yes,** please specify the barriers and suggest how the ILS can help you to remove those barriers. | | |

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| **102** | Does your Organisations have written policies concerning the following? | **YES** | **NO** |
| * Board of Directors / Executive Committee Operations. |  |  |
| * Commission/Committee Terms of Reference/Tasks. |  |  |
| * Conflict of Interest. |  |  |
| * Equity and Diversity (equality on gender, race, …). |  |  |
| * Child Protection / Safeguarding. |  |  |
| * Others: |  |  |
| If **Yes**, please specify. |  |  |

1. **MANDATORY DECLARATION**

|  |  |
| --- | --- |
| **YES** | **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **103** | My Organisation has read and understood the ILS Legislation and understand that it is bound by, must comply with and must observe the ILS Legislation.  The ILS Legislation consists of the ILS Constitution and the ILS Bye-Laws approved by the ILS General Assembly and the ILS Regulations, Policies, Position Statements and Procedures approved by the ILS Board of Directors.  They all can be found on the ILS web site: [www.ilsf.org](http://www.ilsf.org) |  |  |

**Please return this application form to:**

* By e-mail (preferred): ils.hq@telenet.be
* By mail:

ILS Headquarters

Gemeenteplein 26

3010 Leuven

Belgium

**Fees are payable to:**

ILS, Gemeenteplein 26 - 3010 Leuven - Belgium

Bank account details:

Bank Name and address: BNP Paribas Fortis, Diestsesteenweg 99, 3010 Leuven, Belgium.

Bank account number or IBAN number: BE91 0012 4219 9376

BIC or swift code: GEBABEBB

|  |
| --- |
| **THE APPLICATION SHOULD CONTAIN THE FOLLOWING DOCUMENTS:**   1. **This document duly and completely filed in.** 2. **A copy of the Legislation of your Organisation (Constitution, Bye-Laws, etc.) to be submitted in the Native and English Language.** 3. **Documentation of incorporation or recognition as a lifesaving body by relevant authorities (e.g. Government Ministries, National Sports Council, National Olympic Committee).** 4. **A copy of your Organisation's logo (in colours and in black and white).** 5. **The payment of the appropriate fee. When the Organisation is not accepted, the fee will be returned less bank costs.**   **APPLICATIONS WILL ONLY BE CONSIDERED IF ALL FIVE OF THE**  **ABOVE ELEMENTS ARE DELIVERED.** |

**Privacy and Data Protection**

I understand and agree that the information I have provided is necessary for the legitimate interests of the International Life Saving Federation (ILS) and its management and administration. The collected information is subject to the ILS Privacy Policy available on the ILS website at [https://www.ilsf.org/about/policies/](https://www.ilsf.org/about/policies/w) which I have read. I understand that the ILS will not share my personal data with other organisations for any other purpose than that for which the data was collected, including to verify eligibility, to communicate with and to inform about the activities of the organisation and in connection with the administration of its events and that the ILS Privacy Policy sets out my rights, including the right to withdraw my consent, in connection with the use of my personal data.