

RESCUE AWARD OF MERIT NOMINATION

Rescue Award of Merit: presented by the Lifesaving Society to an individual in recognition of intervention in a water-related emergency or to a Lifesaving Society Award holder for intervention in either an aquatic or non-aquatic emergency.

<u>Eligibility criteria</u>: recognition of an emergency, willingness to intervene, evidence of judgment

INFORMATION ON RESCUER(S)

Name:	
	City & Province:
Postal Code:	Phone #:
Email:	Birth date:
Lifesaving Society award holder (Y/N):	ID #:
INFORMATIO	N ON RESCUED INDIVIDUAL(S)
Name:	Address:
City:	Province:
Postal Code:	Age:
INFORMAT	ION ON ASSISTANTS (IF ANY)
Name:	Address:
City:	Province:
Postal Code:	Age:
<u>INFORMA</u>	TION ON WITNESS (IF ANY)
Name:	Address:
City:	Province:
Postal Code:	Age:

Date

LOCATION OF INCIDENT:
DATE AND TIME OF RESCUE:
TYPE OF RESCUE (Aquatic or non-aquatic):
WEATHER CONDITIONS (Type and condition of water hazard (temperature, depth, wave size, wind, current, distance from shore, dock, etc.)
COMPLETE DESCRIPTION OF THE RESCUE OPERATION (include specific techniques used and procedures followed; and degree of personal danger in which the rescuer and rescued were placed. Include any media clippings if possible.)
POST-RESCUE TREATMENT OF THE VICTIM (ambulance, hospital [duration, treatment], etc.):
Submit nominations to the Lifesaving Society: ■ Email: experts@lifeguarding.com ■ Mail: 475 Cochrane Drive, Markham, ON, L3R 9R4
If possible, please attach signed statements from the rescuer, the rescued and any witnesses to the rescue.
and / or

Date