





Application to Sumner Lifeboat - Shore Crew

Sumner Lifeboat welcomes applications for Shore Crew.

Shore crew duties include radio communications, administrative support, and maintenance of buildings and equipment. You can apply for any of these areas. Training is provided for radio communications operators and we will assist you to become familiar with our equipment and administration.

In a shore role you can also volunteer for call-outs, e.g. helping to launch and recover vessels.

Sumner Lifeboat is New Zealand's oldest organised lifeboat unit. It has a proud history of saving lives at sea since the 1870s.

Joining our crew means you will help to ensure that our tradition continues, and you will actively contribute to fulfilling our vital maritime search and rescue role.

Becoming a crew member requires commitment. Shore crew are expected to attend weekly Tuesday evening training/maintenance sessions (min three per month), and for radio operators, at least one Sunday morning session per month as well. We take breaks for mid-winter and Christmas.

We don't require prior boating or maritime experience.

The application process involves assessing the attached written application forms, and an interview.

Sumner Lifeboat is a unit of Coastguard New Zealand. Applicants to Sumner Lifeboat must also complete the application process for becoming a volunteer with Coastguard New Zealand (attached).

For more information, visit <u>sumner-lifeboat.org.nz/support-us/volunteer</u> and <u>coastguard.nz</u>.

If you'd like to join us, please complete the attached forms and return them to us via post or email at the address above.

We look forward to hearing from you.

The Sumner Lifeboat team





Sumner Lifeboat Active Volunteer Shore Crew Application Form

Parent/Guardian Signature if under 18:

Accepted on behalf of Sumner Lifeboat:



To the: Executive Officer I am over the age of 16 and I hereby apply to become shore crew at Sumner Lifeboat. I am interested in (tick): ☐ **COMMUNICATIONS** – Radio Operator ☐ **GENERAL SUPPORT** – Administration support, First Aid room (*circle*) ☐ MAINTENANCE – General repairs and upkeep of building and equipment Name (full): Date of Birth: **DECLARATION:** I understand that to be eligible to start as shore crew at Sumner Lifeboat, I must: live within the Christchurch area have good personal qualities be in good physical health; list any health issues on the Coastguard form (back, heart, blood pressure, vision, hearing etc) be formally approved by Sumner Lifeboat pass security clearance be accepted as a crew member of Coastguard NZ (complete 'Coastguard Active Volunteer Application Form'). COMMUNICATIONS ROLE: I understand that to be eligible to continue as shore crew, I must: attend regular crew training & assessment sessions (min per month: three Tuesdays 7-9pm and one Sunday 9am-12pm) attend outsourced training sessions in Christchurch for a small number of training modules (held at various times of the year and funded by Sumner Lifeboat / Coastguard New Zealand) abide by the Sumner Lifeboat policies and procedures and those of Coastguard New Zealand attend callouts at any time of the day or night to the best of my ability. My limitations on availability for callouts are: GENERAL SUPPORT OR MAINTENANCE ROLES: I understand that to be eligible to continue shore crew, I must: attend at the same time as regular evening crew training & assessment sessions (min per month: three Tuesdays 7-9pm) attend at other times to carry out admin or maintenance tasks, by prior arrangement if available abide by the Sumner Lifeboat policies and procedures and those of Coastguard New Zealand. ☐ I am willing to attend callouts to assist with launching and onshore tasks (optional, tick if appropriate) My limitations on availability for callouts are: I bring the following **skills** to Sumner Lifeboat (e.g. Admin, IT, mechanical, electrical, maintenance, surf lifesaving, etc.): My reasons for applying to become a Sumner Lifeboat crew member are: **Signature of Applicant:** Date:

Date:

Date:



	Coastguard Unit (if known)			2.1				
PERSONAL DETAILS	1)			Date				
Mr/Mrs/Ms/Other First	Name Last Name							
Home Address								
				Postcode				
Work Address								
	Postcode	Postcode		Occupation				
Postal Address (if different from above)								
Date of Birth* *Minimum age is 16 years Place of Birth (for ID purposes only)								
Your Ethnicity NZ European Maori Other (please specify)								
Contact Number (home)	Work	Work		Mobile				
Email Address (please print clea	ırly)							
Next of Kin	Rela	ationship to you		Contact P	Ph			
Address	Address							
I have been a volunteer with Coastguard before Yes No								
Communications Air Patrol Rescue Vessel Unit Administration Active crew (as a crew member on one of our rescue vessels) In flight Observer In-flight Coordinator Pilot Availability eg weekends, weekdays etc: Rescue Vessel Unit Active crew (as a crew member on one of our rescue vessels) Shore crew (Launch and Retrieve, maintenance, fundraising, administration, Incident Management etc) Pilot								
QUALIFICATIONS: (please tick the qualifications you already hold and provide a copy for records)								
Marine Day Ski			Coastal Skipper	, or a o,	LLO			
ILM	VHF/S	SSB	Other					
Aviation PPL Medical First Aid	CPL PHEC		Expiry and Flight H	ours	Oxygen			
Drivers Licence Yes / No			Delib		охуден			
Other								
MEDICAL DETAILS: If you currently do, or have suffered from any disease or physical/mental disability which is likely to affect your efficiency as an active crew member involved with Coastguard activities, and that may also affect your safety and that of the other crew members and public, it is suggested that you consult with your doctor or the Unit Training/Safety Officer prior to commencing any activity.								
Have you read the above paragraph? Do you wish to consult with a Doctor or the Unit Training/Safety Officer? (this will be in confidence)					No No			
Personal Health and Fitness: Height Do you regularly take medication Water confidence: Can you sw		(For Air Patrol Crew) swered yes, please specify		t: Good	Fair Poor No Don't know			
Can you tread water fully clothed for 5 mins?					No Don't know			

FΠ	AND PROPER PERSON CHECK FOR (YOUR NAME)								
Please tick Yes or No as applicable.									
1.	Have you been convicted in any New Zealand or overseas court of law of any offence in the lor are you presently facing charges for any offence including traffic offences?	ast five years,		Yes No					
2.	Have you ever been convicted on any criminal or traffic offence, which resulted in a term of impare you presently facing charges for a criminal or traffic offence which may result in a term of in	ice?	Yes No						
3.	Have you any history of physical or mental health problems, or serious behavioral problems?			Yes No					
4.	Are you, or have you ever been a suspended person under the Maritime Transport Act 1994, or the Shipping and Seaman Act 1952?		Yes No						
5.	Have you ever had a document revoked under the Maritime Transport Act 1994, or do you had a document that is presently suspended under the Maritime Transport Act 1994?	ve		Yes No					
6.	Have you ever had a document suspended or cancelled by the Maritime authority of a country other than New Zealand?	у		Yes No					
DE	CLARATION								
In keeping with the Privacy Act 1993, the above personal information will be used by Coastguard in relation to my Coastguard Volunteer application. The information provided here will be used for the purpose of arranging Coastguard training, keeping me up-to-date on Coastguard matters and role allocation to suit me. Personal information will not be released to other persons except in an emergency. The information that I have provided about my experience and medical history is accurate to the best of my knowledge.									
I understand it is my responsibility to maintain up to date personal and contact details and to advise of any changes as soon as possible.									
I hereby certify that:									
To the best of my knowledge and belief the above statements made and the information supplied in this questionnaire and the attachments are correct. I am aware that the provisions of false information, or the failure to disclose information relevant to the grant or holding of a maritime document constitutes an offence under Section 40b of the Maritime Transport Act 1994 and is subject, in the case of an individual, to imprisonment for a term not exceeding twelve months, or a fine not exceeding \$5,000.									
Signature Date									
UNDER 18 YEARS OF AGE PARENT/GUARDIAN/CAREGIVER CONSENT									
I am the parent/guardian/caregiver of the applicant who is under 18 years of age. I have read and understood this application form and the declaration and I consent to the applicant's application to become a Coastguard Volunteer on the basis set out on this form.									
Name of parent/guardian/caregiver									
Address									
Si	gnature	Date	/	1					

Return completed form to your local Coastguard Unit, or post to: Coastguard New Zealand, PO Box 33559, Takapuna, Auckland 0740

Committed - We're committed to saving lives at sea

OUR COMMITMENT TO YOU

- We will put your personal safety above all else
- To treat you with respect
- To recognise the time, energy and sacrifices you make for our organisation
- Provide the training you need to excel in you chosen Coastguard pathway
- To provide you with leadership and support
- Keep you informed of our organisation's direction

YOUR COMMITMENT TO COASTGUARD

- Your time and energy
- To share our passion for saving lives at sea
- Always work with dedication, professionalism and respect
- Ensure that your actions enhance Coastguard's reputation
- To attend required training for your chosen Coastguard pathway

The Charity Saving Lives at Sea