

Youth Water Safety Youth Reference Group 2025 - 2026

APPLICATION FORM

To apply for the Youth Reference Group, please complete the attached form and submit it by via email to beamermate@royallifesaving.com.au. If you require any assistance completing the application or have any questions about the role, please contact Tneale at 08 9383 8200 or tmaher@royallifesavingwa.com.au. We encourage applications from young people of all backgrounds and experiences: your voice matters!

Royal Life Saving Youth Reference Group Expression of Interest Form

Full Name:
Date of Birth:
Pronouns:
Mobile Phone Number:
Email address:
Do you identify as Aboriginal or Torres Strait Islander?
Yes No
What is your country of birth?
Do you speak any languages other than English?
Yes No

Why do you want to be part of the Youth Reference Group? (100 words max)
What skills or strengths would you bring to the Youth Reference Group? (100 words max)
Are you able to attend at least half of the Youth Reference
Group meetings (online or in person)? Yes No
Do you have any other commitments that may affect your availability? Yes No

Do you have any accessibility needs or requirements to help you participate fully? If yes, please specify.
Yes No
Do you have any dietary requirements? If yes, please specify.
Yes No
I confirm that all information provided is accurate. If under 18: a parent/guardian must sign below to confirm consent for participation.
Parent/Guardian Name:
Contact Details:
Signature: