

Event Accreditation Application Form

This form must be completed and sent to SLSGB Ground Floor, Buckland house, Park 5, Harrier Way, Sowton, Exeter, EX2 7HU to arrive at least 3 weeks before the proposed date of the event to be held. **Applications should include a payment of £30** (Cheque made payable to SLSGB) to cover the costs of administrating the Event Accreditation program.

PLEASE NOTE THAT ACCREDITATION IS ONLY AVAILABLE FOR EVENTS ORGANISED BY SLSGB AFFILIATED ORGANISATIONS AND ALL PARTICIPANTS MUST BE SLSGB MEMBERS (Day membership is only available in exceptional circumstances on a case by case basis and must be pre- agreed as a condition of the event accreditation)

Failure to gain accreditation will mean that the SLSGB will not recognise the event. Only events recognised by SLSGB can be placed on the official SLSGB calendar, and ii) be permitted to use the name and logo of SLSGB in their event promotion and iii) be eligible to be covered by SLSG insurance (ask for full details of cover provided)

I	Event Name		
2	Applying Organisation/Club		
3	Name of person making the application		
	Position in applying organisation		
	(Must be an Officer, Committee member Director or Trustee)		
4	Contact Address –		
5	Contact Telephone Number		
6	Contact e-mail	-	
7	Date/s of Event		
8	Start and Finish Time Start: Finish	1	
9	Event venue		
10	Detailed Event Description (attach additional information if appropriate).	-	
П	Does the event require SLSGB support	Yes □	No □
	If yes please provide details of support requested (complete Service Level Agreement Form)		
	(complete dervice Level Agreement Form)		
12	Has written confirmation of permission been given by the land owners/pool owners for the event to be staged?	Yes □	No □
	Please attach evidence, e.g. meeting minutes or confirmation email and name of	Attached □	
	land owner /pool and contact details		
13	A completed risk assessment for this venue and events to be held must be attached	Attached □	
14	A completed SOP and LOP for this Event must be attached	Attached □	
15	A completed EAP for this Event must be attached	Attached □	
16	Is a back-up venue required and available?	Yes □	No □
17	If yes to 16 above has written confirmation of permission to use a backup venue been provided	Yes □	No □
	by the land owner? (Please attach, as appropriate e.g. minutes of a meeting or email)		
18	Will day membership of SLSGB be required for non-member participants? (Day membership may only be used in exceptional & pre-authorised circumstances. If you intend to use day	Yes □	No □
	membership you must obtained the required SLSGB HQ approval)		
19	Please confirm that you have read and fully understand the SLSGB National Safety Guide and that the event	Yes □	No □
	will be run in accordance with this guide		
20	Is any element of the event not being run under current SLSGB or ILS/ILSE competition rules?	Yes □	No □
21	If yes to 20, a copy of the rules that will apply must be provided.	Attached □	

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22	How many participants are anticipated for this event? (approx.)			
23	Who will be the Lead Referee/person in charge of the conduct of the event and compliance with the rules?		Yes No No Service Yes No No Service Yes No No Service Yes No No Service Attached Service	
	Name	Qualifications and experience		
24	Details of person in charge of the event safety management who holds an SLSGB Event Water Safety Manager Qualification			
	Name	SLSGB Membership No.		
25	Are all the safety personnel qualified to SLSGB standards and as required by the SLSGB National Safety Guide?		Yes □	No □
26	Is the event being run by or for an SLSGB Region		Yes □	No □
27	Do you have any of your own insurance cover? If yes please attach a copy			No □

I the undersigned confirm that I am fully and properly authorised by the Event Organiser to make this application and that by doing so am committing the Event Organiser to the terms and conditions as set out in this application.

I agree that the event organiser as specified in this application is responsible for ensuring that third party contractors at the event have relevant insurance, risk assessments, competency and experience and that it is the entire responsibility of the event organiser to ensure implementation of the event risk assessments, operating plans and adhering to event rules, and all necessary safety requirements.

I confirm that to the best of my knowledge and belief the information given on this form is correct.

I agree that, if any of the details given change before the event is conducted, I will immediately notify SLSGB of the amendments, and that failure to do so could result in SLSGB accreditation being withdrawn.

I understand if I need any assistance with delivery or resources for my event, I will complete a Service Level Agreement Form with SLSGB. I attach a copy of the event programme and entry form (as appropriate).

I request that SLSGB accredit this event.

Signed Date

(THIS MUST BE THE PERSON DESCRIBED IN SECTION 3 ABOVE)

FOR OFFICE USE ONLY						
Date application received by SLSGB	Application Number					
Does the event require SLSGB support?			Yes	No		
f "yes" refer application to the National Event Manager to arrange Service Level Agreement (do not proceed until further check complete)						
Referred to Event Manager and Service Level agreed?			Yes	No		
Has use of the day membership been authorised?			Yes	No		
Is there a completed risk assessment attached for the venue and/or event?			Yes	No		
Is there a completed EAP attached?			Yes	No		
Is there an SOP and completed LOP attached?			Yes	No		
Is there written evidence of landowner's permission attached?			Yes	No		
If a backup venue is required, has evidence of permission from landowner been provided?			Yes	No		
Payment Received?			Yes	No		
Does event meet SLSGB declared activity description for recognised events? If no refer to insurers (if outside of regular activities)			Yes	No		
TO BE COMPLETED AND SIGNED OFF BY THE NATIONAL SAFETY AND OPERATIONS MANAGE	R					
What level of risk has this event been evaluated at from the submitted RA's? provide written evidence of evaluation of risk level		High	Medium	Low		
Accreditation Granted? If no there must be a record of specific reasons to be signed off by both the National Events Manager & National Sa	fety & Operations Manager		Yes	No		
Is accreditation conditional to specific conditions?			Yes	No		
Have conditions been confirmed to event organiser in writing?			Yes	No 🖳		
Have conditions been followed up and confirmed to be achieve satisfactorily?			Yes	No 📙		
Confirmation sent to event organiser (including SLSGB insurance certificate, if appropriate)?			Yes	No 🖳		
Event information for publicity received?			Yes	No 🖳		
Event advertised on the SLSGB website?			Yes	No 🔛		