

2025 Flowers Sea Swim

Saturday 14th June

Volunteer Expression of Interest						
Surname:			First name:			
Address:						
Telephones:	Home:					
	Work:					
	Cell:					
Email:						
Skills you would like to put to use						
in the Flowers Sea Swim:						
Volunteer	Post available: Lifeguards*, Safety Marshall (Beach & Water)*,					
position(s) you	Recorder/Registration Personnel, Medal Presenter, Prize Desk Personnel/Prize					
are interested in:	Pack distribution & Meal Distribution.					
Have you	If so, in w			hat capacity?		
volunteered for						
the Flowers Sea						
Swim previously?						
	Before the race			Day of race	<u>Day of race</u>	
Age:			Shirt size:	:		
Medical:	Do you have any medical conditions we should be aware of?					
	If Yes, please provide details.					
Emergency	Name:			Phone:		
contact:						
					1	

Please return completed Expression of Interest form to the Flowers Sea Swim:

Email: info@flowersseaswim.com

Fax: 949-0595

Telephone: 623-0000

Note:

The date of the event is Saturday, June 19.

Timing will vary slight, though generally should be between 11am – 5pm on the day of the event. However, safety marshalls, lifeguards and other medical personnel will be required to attend a 1 hour safety briefing prior to the event. Date/time/location TBC.