

Assessment Task 3: ATV Operator Declaration

Section One						
First Name:			Surname:			
Date of Birth:			Club / Grou	up:		
I agree to abide by the requirements of Surf Life Saving Australia in operating an ATV safely. I understand my role and responsibilities as an ATV Operator and shall at all times act in a responsible and professional manner inline with the SLSA All Terrain Vehicle policy and ATV Code of Conduct. I have completed and understand the content of the ATV Operator Certificate Learner Guide. If at anytime my Driver's Licence is suspended or cancelled I will notify my club immediately and shall not undertake ATV operations until my licence is reinstated.						
Signature:			Date:			
Section Two						
Driver's Licence Number:				Licence sighted:		
Club Officer Nar	me:					
Club Officer Signature:				Date:		