

## **NOMINATION FORM**

Please fill in as much of this nomination form as you can, print it out and post it to us at the address shown below. If you need any guidance in completing the answers, please phone the Secretary on 0151 236 1928.

### **DETAILS OF THE RESCUE IN ALL CASES**

Give full details of the person you are nominating for an award:-

Title (Mr, Mrs, Miss, Ms.) \_\_\_\_\_

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Home address: \_\_\_\_\_

Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Have you Informed the nominee/s that you have nominated them? \_\_\_\_\_

If they have been informed have they consented to you providing their personal data? \_\_\_\_\_

Were you a witness to the rescue? \_\_\_\_\_ Did anyone else assist in the rescue? \_\_\_\_\_

If yes, give their name. If more than two people were involved, please send us their details on a separate sheet.

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Home address: \_\_\_\_\_

Name and address of the person saved (if known)

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Home address: \_\_\_\_\_

Age: \_\_\_\_\_ Did the person(s) rescued survive. \_\_\_\_\_

Give as full a description as you can of the rescue or attempted rescue and comment on the degree of danger.

Where did the incident happen? \_\_\_\_\_

When did the incident happen? \_\_\_\_\_

What time of day was it? \_\_\_\_\_ What were the weather conditions? \_\_\_\_\_

Were the emergency services called? \_\_\_\_\_ If yes, which service? \_\_\_\_\_

Did the rescuer give any form of resuscitation? \_\_\_\_\_

What form of resuscitation did the rescuer give? \_\_\_\_\_

Does the nominee have any training in First Aid, give details if known? \_\_\_\_\_

## **RESCUE FROM WATER OR ICE**

Was the rescue from water or ice? \_\_\_\_\_

If water, please answer the following;

How deep was the water where the rescue took place? \_\_\_\_\_

If the rescuer had to swim, how far (there and back)? \_\_\_\_\_

Describe the water conditions (height of waves, strength of current)? \_\_\_\_\_

Please enclose copies of any relevant Press cuttings

## **RESCUE FROM FIRE**

Describe the fire (building, flames, smoke, internal, external, vehicle).  
\_\_\_\_\_  
\_\_\_\_\_

Please enclose copies of any relevant Press cuttings

## **GENERAL (OTHER) RESCUE**

Describe the rescue.  
\_\_\_\_\_  
\_\_\_\_\_

Please enclose copies of any relevant Press cuttings

Have you recommended the nominee for any other award? \_\_\_\_\_

If yes, please state to which organisation. \_\_\_\_\_

Please supply your own contact details:-

Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Home address: \_\_\_\_\_

Telephone no. \_\_\_\_\_ E-mail: \_\_\_\_\_

Thank you for making this nomination.

Please e-mail to: **secretary@liverpoolshipwreckandhumanesoc.org**

Or you can print it out and post it to:-

**The Secretary,  
Liverpool Shipwreck & Humane Society, PO Box 156, HOLYWELL, CH6 9DW**

*If the case meets our criteria, and we may need to seek corroboration from the emergency services if applicable, it will then come before the committee at the next meeting held every three months. The award winner will then be notified by us or by the local police force.*