



The life of the beach.

DARWIN SURF LIFE SAVING CLUB

PO Box 42771 Casuarina NT 0811

Darribah Road Brinkin NT 0810

Phone 0459 837 578

A.B.N 58 452 374 895



2026 Nipper Season Swim Skill Evaluation & Certificate (Required Annually) U8 – U14

A Swim Skill Evaluation is required by all applicants (**U8 – U14**) wishing to register as a Nipper. This is a compulsory requirement to participate in **any** activity throughout the season.

Swimming Skills to be undertaken:

- | | |
|-----------------|--|
| Under 6 | From a standing position in waist-deep water, perform a front glide and recover to a secure position. Kick on wall with face in water. Perform a back and front float with/without holding a buoyant aid and recover to a secure position. |
| Under 7 | From a standing position in waist-deep water, perform a front glide, kick for 3m and recover to a secure position. Perform a back and front float for a few seconds and recover to a secure position. |
| Under 8 | 25m swim (any recognized stroke) Prefer Freestyle
1 minute survival float. |
| Under 9 | 25m swim (any recognized stroke) with 1 minute survival float
Competition swim 150m open water swim. (Prefer Freestyle) |
| Under 10 | 25m swim (freestyle) 1.5 minute survival float
Competition swim 150m open water swim. (Prefer Freestyle) |
| Under 11 | 50m swim (freestyle) 2 minute survival float
Competition swim 200m open water swim. (Prefer Freestyle) |
| Under 12 | 100m swim (freestyle) 2 minute survival float
Competition swim 200m open water swim. (Prefer Freestyle) |
| Under 13 | 150m swim (freestyle) 3 minute survival float
Competition swim 200m open water swim. (Prefer Freestyle) |
| Under 14 | 200m swim (freestyle) in less than 5 mins – 3 min survival float
Competition swim 200m open water swim. (Prefer Freestyle) |

Your child can attend any of the Darwin Surf Life Saving Club **organized** swim test at various pools/Open Water venues. Please see dates and times advertised per facebook/Newsletters/emails.

Or

This Form can be completed by your child's **swim coach** and returned to the surf club via email darwinslsc@iinet.net.au.



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SWIMMING ACHIEVEMENT CERTIFICATE

This Swimming Certificate is for _____ aged _____ years.
(Please print clearly)

I have assessed the above named child and confirm that he/she is able to swim **distance/or**

Meters _____ **Stroke** _____ and float for the required minutes.

Assessor's Name: *(please print)* _____

Assessor's Signature: _____

Swim Coach/Club: _____

Note:

Freestyle is the preferred stroke.

Distance needs to be noted as participants will be swimming in the ocean.

If not a strong swimmer extra supervision will be required.

Thank you for your time and your support for our complimentary skills for life in and around our water ways.

Yours sincerely

Nicole Tisdale

Director of Member Development

Darwin Surf Life Saving Club

Darribah Road, Brinkin NT 0810 | PO Box 42771 Casuarina, NT 0811

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WE ARE A PROUD
LEVEL 3 ACCREDITED
GOOD SPORTS CLUB.

Committed to a healthier
and more family-friendly
club environment.