

**INTERNATIONAL LIFE SAVING FEDERATION**

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**REQUEST FORM FOR AN INTERNATIONAL CERTIFICATE**

|  |
| --- |
| ORGANISATION **Japan Lifesaving Association** |

The above mentioned organisation confirms that the following individual has fulfilled all conditions set forward by ILS to obtain the requested International Certificate:

Please complete in BLOCK capitals

Add a good quality photo:

* placed here
* provided separate in jpg or similar format

Surname

Forename(s)

Date of birth (DD/MM/YYYY) . . / . . / . . . .

Country of birth

E-mail

Phone number

Address

**I request the following certificate(s)**: Please cross the appropriate cell (X)

|  |  |
| --- | --- |
| ILS Lifesaver |  |
| ILS Beach Lifeguard |  |
| ILS Instructor Beach Lifeguard |  |
| ILS Pool Lifeguard |  |
| ILS Instructor Pool Lifeguard |  |
| ILS Automatic External Defibrillation (AED) |  |
| ILS Instructor AED |  |

# Name and Function in the Federation Date Seal of Federation

Signature,