

MEMBERSHIP APPLICATION

NAME : MR/MRS/MISS/MS			
ADDRESS:			
HOME TEL:	OFFICE TEL:	OFFICE TEL:	
OTHER TEL:	PAGER:	PAGER:	
EMAIL:	DATE OF BIRTH:	DATE OF BIRTH:	
OCCUPATION:	COMPANY:	COMPANY:	
NATIONALITY:	IC/PP NO:	IC/PP NO:	
BSAC entrance & subscription fees Local entrance & subscription fees Club Diver course fee		\$86.00	
Club Diver course fee		\$86.00	
Sports Diver course fee			
Total			
(all cheques must be crossed and made to the order	er of DIVE CLUB 854)		
If you have any previous experience of and dates below:	r qualifications in scuba diving, please g	ive details of qualificatio	

INDEMNITY FORM

I,	, hereby indemnify
DIVE CLUB 854, its staff and instructors or the organise any loss of property, accident or injury to my body or an in underwater activities.	•
I agree to abide by the rules of DIVE CLUB 854 in relative signature signify the full knowledge of these rules and reg	
My participation in this activity is solely at my own risk a with all instructions of the staff, the instructors or the org	
I further declare that I am over 21 years of age and I am ailments which may jeopardise my safety, health or well activity.	
Signature of applicant:	Date:
Signature of proposing committee member:	Date:

MEDICAL FITNESS

No member may take part in any aqua-lung or open-water activity without holding a current BS-AC Certificate of fitness.

TRAINING

The BS-AC Training Programme is followed in DIVE CLUB 854. This comprehensive programme of instruction leads to the Club / Sports Diver qualification and further programmes take the qualified diver to higher diving grades should the member wishes to do so. Details of the training and qualifications achieved are recorded in the member's own Qualification Record Book.

Dive Club 854 has a safety record second to none and all training is designed to ensure the safety of members and to maintain this record.