DESERT SPORTS DIVING CLUB
MEMBERSHIP APPLICATION

PERSONAL DETAILS

Surname:	First Name:
Date of Birth (dd/mm/yy):	Occupation:
Postal Address:	Emirate:
Employer:	
Home Tel:	Work Tel:
Mobile: 050/055	Fax:
Email address (Used for DSDC correspondence only):	
Type of membership applied for:	Fees: See attached Membership & Dive Fees
Next of Kin contact details:	

DIVING DETAILS

Qualification:	Approved:
No. of completed dives:	Date of last dive:
BSAC Membership No.	Renewal Date:
Diving Medical renewal date:	Diving Insurance Co: Number: Expiry:

In order to take advantage of the BSAC insurance policy, you MUST have up-to-date membership in BSAC and DSDC.

I understand that Desert Sports Diving Club engages in adventurous diving and in order to participate more fully in club activities, I shall endeavour to upgrade (if necessary) my diving qualification to the level of at least BSAC Sports Diver (or equivalent) at the earliest.

Please list any additional activities you are willing to do at DSDC beyond those listed below and/or indicate any special skills you may have to offer:

As a member of a non-profit making club run by members for all members, I agree to assist when so requested with activities such as cylinder filling, boat maintenance, catering etc.

INDEMNITY

I agree to abide by the rules of the DESERT SPORTS DIVING CLUB. I agree that I undertake any swimming training, diving or any club activities at my own risk and that DESERT SPORTS DIVING CLUB, its officers and members shall not be held responsible for any loss or injury I sustain or cause. I am not suffering from any physical complaint or ailment, which may jeopardize my safety or well being while taking part in such activities.

Signature of Applicant:	**Date:**
If Applicant is under 18 years of age Signature of Parent / Guardian	**Date:**

WELCOME TO DESERT SPORTS DIVING CLUB