



# Dive-S80 Membership Application Form

<b>Personal Details</b>	
Mr / Mrs / Miss / Master (circle that which applies)	
First Name	
Surname	
Date of Birth	
Full Address (including post code)	
Email address	
Telephone number	
<b>Membership Required</b> (Please tick relevant box)	ADULT <input type="checkbox"/> JUNIOR <input type="checkbox"/> (Junior member's require a parent/guardian consent signature) £60                                  £30
<b>Emergency Contact Details</b>	
First Name	
Surname	
Relationship	
Full Address (including post code)	
Telephone number	

Please tick the box as proof that you have read and understood the terms and conditions of the club, along with its' privacy policy

Please tick the box to give consent for any images and videos' taken of you to be used for club purposes, such as website, advertising and social media.

You are signing this form in acceptance of all terms and conditions. (The club has a right to change its' terms and conditions to keep policies current and relevant to abide by PADI and industry standards. Any future updates and amendments will be posted on the website)

Signature ..... Date .....

Parent/Guardian Signature ..... Date .....

**Official use only:**

PADI self cert medical form provided	
Amount Paid	
Date payment cleared	
Allocated membership number	
Renewal date due	