



Application Form for Unqualified Divers 2022

Personal Details:

Title:	
Forename:	
Surname:	
Date of Birth:	
Email:	
Home Tel:	
Mobile Tel:	
Address:	
Postcode:	
BSAC No.	

Emergency Contact Details:

In case of an emergency, please provide details of the person who you wish to be informed.

Name:	
Relationship:	
Home Tel:	
Mobile Tel:	
Address:	
Postcode:	

General Information:

Have you ever completed a try dive either in a pool or in the sea, give details:	
Any information you feel PSAC should know which may impact your training:	
List any diving equipment you own which you would like to use in your training:	

Declaration

Your signing of this form allows PSAC to hold your information for the duration of your time as a fully paid club member, PSAC follows all the current GDPR regulations and policies. Your information will be deleted from our systems if you ever resign your membership from PSAC and your information will only ever be shared with third parties in the interest of your diving safety and in case of emergency.

By signing this form, you agree to abide by the PSAC Constitution, PSAC Rules and Safeguarding policies.

Please indicate your consent for PSAC to use photographic images of yourself (which may be taken during diving activities and social events) on our social media platforms for advertising and promotion purposes.

- I consent to the use of photographic and video images to be used by PSAC: **YES / NO**

Sign:	
Print:	
Date:	

Please return your completed form to the PSAC Membership Secretary (John Mitchell) via email or by scanning the form and messaging via WhatsApp.

Kind regards,

John Mitchell – PSAC Membership Secretary & Treasurer

Email: Johnmitchell_1@hotmail.com

Tel: 07787 562036