

Caithness Diving Club

Membership / Joining Details



Name :

Address :

Post Code :

Landline telephone number :

Mobile phone number :

Email address (for club correspondence) :

Date of Birth :

Existing BSAC Member Y/N?

If Yes, Membership number :

Diver Grade :

Instructor Grade :

Existing ScotSAC Member Y/N?

If Yes, Membership number :

Diver Grade :

Instructor Grade :

Existing Diving qualifications (eg PADI, ScotSAC etc) :

Joining Date :

Please return this form to :

Mr Maurice Edmunds
Membership Secretary
21 Riverview
Thurso
Caithness
KW14 7QJ
01847 896335