

NORTH WALES SUB-AQUA CLUB MEMBERSHIP APPLICATION FORM						
APPLICANT INFORMATION						
Name:						
Address:						
Town:	County:			Postcode:		
Phone Number:				e-mail:		
	DIVING EXF	PERIENCE	,			
Have You Dived Before? : Yes / No				Total Number of Dives:		
Diver Qualification:			Diving Agency: SAA / BSAC / PADI / SSI / CMAS / Other			
Do You Have Your Own Diving Equipme	ent? : Yes / No					
	DIVING	NEEDS				
What Are Your Diving Needs / Aspiration	ns?:					
Would You Be Interested in Any of The	Following Courses?:					
Rescue Diver: Yes / No	First Aid:	Yes / No	Phot	Photography: Yes / No		
NITROX Diver: Yes / No	O2 Administration:	Yes / No	Othe	Other:		
MEMBERSHIP APPLIED FOR (JANUARY 1 <sup>ST</sup> – DECEMBER 31 <sup>ST</sup> )						
Full Membership (Unqualified Diver) at £100 per year plus £20 per month						
Full Membership (Qualified Diver) at £70 per year plus £20 per month						
Associate Membership (Non-Diver) at £20 per year						
Monthly Payment Set Up: Barclays Ba	nk, NWSAC Sort Co	ode: 20-51-23	Acco	unt Numb	ber: 60669105	
I	DISCLOSURE OF	INFORMATIO	N			
Disclosure of Personal Information Strict conditions apply to the disclosure Association). We will not disclose perso so. Respect to confidentiality will be gi member's diving activity may be made i. we have the statutory power of	onal information to ar ven where appropriat available provided:	ny third party unl e. In certain circ	ess w	ve believe i	it is lawful to do	

- ii. the information is clearly not intrusive in nature
- iii. the club member has consented to the disclosure
- iv. the information is in a form that does not identify individual members unless consent has been received

## **APPLICATION SIGNATURE (S)**

I certify that the information I have given above is correct and that I have read and will comply with North Wales Sub-Aqua Club's Equality, Diversity and Inclusion Policy, Welfare Policy and Club Constitution. I understand that the equipment loaned to me by North Wales Sub-Aqua Club is my responsibility and that I am financially liable for it should I damage or lose it, whether Inadvertently or otherwise.

Signature of Applicant:	Date:			
Signature of Parent/Guardian (if under 18) or Car	rer: Date:			
OFFICIAL USE ONLY				
Payment Confirmed: Yes / No	Monthly Payment Start Date:			
Qualification Level Confirmed: Yes / No	Membership Start Date:			
NWSAC Membership Number:	SAA Training Pack Required: Yes / No			



## **Equality Act 2010**

This section of the Membership Application Form will be detached from your application and will not be used as part of the membership process. The information collected is only used for monitoring purposes in an anonymised format to assist the club in analysing the profile and make up of individuals who apply for membership. In this way, we can check that we are complying with the Equality Act 2010.

The Equality Act 2010 protects people against discrimination on the grounds of their age and sex.

Please State Your Date of Birth:	
Please Indicate Your Gender:	Male / Female / I do not wish to disclose this

The Equality Act 2010 protects people who are married or in a civil partnership.

Please Indicate The Option Which Best Describes Your Marital Status:				
Married	Divorced			
Single	Widowed			
Civil Partnership	I Do Not Wish To Disclose			
Legally Separated				

The Equality Act 2010 protects people against discrimination on the grounds of their race, which includes colour, nationality, ethnic or national origin.

Please Indicate Your Ethnic Origin:	
White	Other Ethnic Group
Black or Black British	Chinese
Asian or Asian British	I Do Not Wish To Disclose
Mixed	

The Equality Act 2010 protects disabled people - including those with long-term health conditions, learning disabilities and so called "hidden" disabilities such as dyslexia. If you tell us that you have a disability we can make reasonable adjustments to ensure that you are given every opportunity to experience the club's diving activities.

Do You Consider Yourself To Have A Disability?:	Yes / No			
If Yes, Please state the type of impairment which applies to you:				
Learning Disability / Difficulty	Physical Impairment			
Sensory Impairment	Mental Health Condition			
Long Standing Illness	Other			

North Wales Sub-Aqua Club fully respects all aspects of the Equality Act 2010 including The Equality Act 2010 which protects bisexual, gay, heterosexual and lesbian people from discrimination on the grounds of their sexual orientation and The Equality Act 2010 which protects people against discrimination on the grounds of their religion or belief, including a lack of any belief. Please see the club website for further details of North Wales Sub-Aqua Club's Equality, Diversity & Inclusion Policy. www.nwsac.wales/equality.pdf