

Dive Cert.

## PORT MORESBY SUB AQUA CLUB INC.

C/- RPYC, Papua New Guinea

	<u>MEM</u>	BERSHIP AF	PLICAT	ION / R	ENE	WAL FO	ORM 2020		
N	lembership	Fees							
	• □ New I	ewal / Member since							
•	Persons Subscrip		ership in the	ership in the Club after 1 July need only pay half the Annual					
•		ship year runs from ons/renewals for the							
	MEMBERSHIP OPTIONS		Subscription		Total Payable		PAYMENTS TO		
	Single Membership		K250.00			POMSAC PLEA			
	Family Mer	mbership	K400.00				DO NOT LEAVE CASH IN		
			Total	l Paid			THE POMSAC BOX in RPYC Reception		
		Please er	sure all deta	ails are filled	out c	orrectly –			
YOU	WILL NOT						URATELY COMPLETED		
	NOT	E: You need to be a	member of tl	he RPYC to b	ecom	ne a member	of POMSAC.		
<u>Prim</u>	ary Member	r Information				1			
Nan	ne:-			Date of Birth	Date of Birth				
RPYC Mbr #				Email Addre	Email Address				
Home No.				Work No.	Work No.				
Mobile No(s).				Other					
Snorkeler		□ Yes □ No		Diver		□ Yes □ No (if Yes complete below)			
Dive Insurance <sup>1</sup>		□ Yes □ No		Insurance Policy No.					
Dives Logged				Last Dived					
Dive Cert.			Cert No.			Cert Date			
<u>Famil</u>	y Member Infor	<u>rmation</u>							
Name:-				Date of Birth	า				
RPYC Mbr #				Email Addre	ess				
Home No.				Work No.					
Mobile No(s).				Other					
Snorkeler		□ Yes □ No		Diver		□ Yes □ No			
Dive Insurance <sup>1</sup>		□ Yes □ No		Insurance P No.	olicy	, see seempe			
Dives Logged				Last Dived					

Cert No.

Cert Date

<sup>&</sup>lt;sup>1</sup> POMSAC strongly recommends that all members have DAN AsiaPac Insurance

## **Family Member Information**

Name		Diver Cert & No.		D.O.B	
Name		nsurer & No			
Name		Diver Cert & No.		D.O.B	
INAITIE		Insurer & No		<i>D</i> .О.В	
Name		Diver Cert & No.		D.O.B	
INAITIE		Insurer & No		<i>D</i> .О.В	
Name		Diver Cert & No.		D.O.B	
INAITIE		Insurer & No		ט.ט.ם	

I hereby apply for membership in the Port Moresby Sub Aqua Club Inc. I agree that if I am accepted as a member, I will abide by the rules and regulations set down by the Club. Members under 18 years of age require a parent or guardian to sign on their behalf.

	GET TO SIGN THE KNOWLEDGEMENT *****					
Primary Member Signature:	Date:					
Family Member Signatures:	Date:					
•	e sure that you have done the following :					
<b>Tick</b> ☐ Filled in the Application Form Correctly.						
☐ Sign the Application Form(s). If this is an applic the form.	Sign the Application Form(s). If this is an application for Family Membership, each applicant must sign the form.					
☐ Signed the Disclaimer & Acknowledgement. If applicant must sign an indemnity clause.	=					
	Enclose a photocopy of your diving qualification(s) and insurance. If this is an application for Family Membership, include a photocopy of each applicant's qualifications and insurance.					
	Enclose the correct fees with this application (cheque made to "POMSAC", for cash payments, please contact the POMSAC treasurer through <a href="mailto:pomsac@gmail.com">pomsac@gmail.com</a> or pay on your next POMSAC Trip).					
The Committee will consider your application at its the Committee's decision shortly thereafter.	next meeting. The Club Secretary will notify you of					
Membership Use Only Application and indemnity received	Dive certificates on file					
RPYC Membership number confirmed Acknowledgment sent	Insurance details on file Circulation list updated					
Accepted (generally Club President)						

Seconded (Membership)