



IDSSC Consultant Member Form Information

Consultant Name: _____

Address: _____

_____ Country: _____

Phone: _____ Fax: _____

E-mail: _____ Web Site: _____

Diving Instructor Level: _____ Agency: _____ C-Card Number: _____

Diving activity:

Recreational: Yes/ No - Hyperbaric Medicine: Yes/No - Technical: Yes/ No - Scientific: Yes/ No
Commercial: Yes/ No - Archaeology: Yes/ No - Apnea: Yes/ No - Public Safety Diver: Yes/ No
Forensic: Yes/ No - Crime Scene Investigator: Yes/ No – First Aid/CPR/AED/O2: Yes/ No

Benefits & Privileges of Membership:

Opportunity to participate in and promote worldwide safety through worldwide effort to develop standards. Greater recognition for divers traveling internationally.
Improved dialogue means opportunities for new ideas and developments that support the growth of recreational diving worldwide. Use of IDSSC Name and Logo. **Free Membership which will be valid for two years and automatic renewal if both parties agree .**

Consultant Member Requirements:

The consultant will be the member who is in charge of responding to inquiries in their area of training and will provide help to update and improve existing programs diving. The Consultant Member are expected to maintain high standards. This applies to business and ethical practices, as well as training programs.

CONSULTANT MEMBER

Signature:

Print Name:

Date:

IDSSC EXECUTIVE DIRECTOR

Signature:

Print Name:

Date:

The members must submit to file electronic copy of certificates, passport photograph and this membership form and accept the IDSSC diving standards and safety procedures.