



IDSSC Reciprocal Membership Form Information

Agency Name: _____ Contact Name: _____

Address: _____

_____ Country: _____

Phone: _____ Fax: _____

E-mail: _____ Web Site: _____

Name of Boards of Directors: President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

Brief description of your Agency or Association: _____

Diving activity:

Recreational: Yes/ No - Medical: Yes/No - Technical: Yes/ No - Scientific: Yes/ No

Commercial: Yes/ No - Archaeology: Yes/ No - Apnea: Yes/ No - Public Safety Diver: Yes/ No

What country or countries are represented? (Please list all):

Benefits & Privileges of Reciprocal 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. Membership form valid for two years and automatic renewal if both parties agree. This membership is free.

Reciprocal Member Requirements and Obligation:

Compliance with IDSSC Standards. The Member shall require its members to conduct all training programs in strict accordance with such standards as may now exist or hereafter be established by IDSSC, and in all other respects shall abide by such rules, regulations, and other requirements as may now exist or hereafter be established by IDSSC.

Member Commission are expected to maintain high standards. This applies to business and ethical practices, as well as training programs. These include:

1. Having all required licenses and permits,
2. Complying with labor and tax laws,
3. Conducting business with a commitment to high quality and public safety.

MEMBER REPRESENTATIVE

Signature:

Print Name:

Date:

IDSSC COORDINATOR

Signature:

Print Name:

Date: