



Membership Details and Declaration 2011

Personal details	Surname:	
	Forenames:	
	Title:	
	Initials:	
	Date of Birth:	
	University member (Y/N):	
	Student (Y/N):	

Contact details	Contact Telephone:	work: mobile: home:
	Email address:	
	Contact Address:	
	Postcode:	

CUUEG membership type (full/affiliate):	
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diving members only

Next of Kin	Next of Kin:		Tel:	
	Next of Kin's address :			

Diving	BSAC Membership No:	
	BSAC Qualification:	
	Instructor qual/no:	
	Non-BSAC diving quals:	
	Cold-water experience:	
If from a different BSAC branch, tick here to have your BSAC membership transferred to CUUEG		

Declaration

I agree to be bound by the current version, and any future amendments (as applicable), of CUUEG's: (1) Constitution, (2) Financial Rules and (3) Safe Diving Practices. These documents are available from any Branch Officer or online from www.cuueg.org.uk/contact.html.

I agree that my details, as given on this form, will be kept in a computerised database for administrative use within the Group. I understand that these details will not be passed outside the Group, other than to BSAC as part of routine membership administration, or to the University and Emergency Services in the event of an incident. I also understand that, to exercise my right to inspect these details, have them altered or have them removed, I should ask the Membership Secretary of the Group.

Signed _____

Date _____