



DIVING FEDERATION

MEMBERSHIP APPLICATION FORM 2018

Please complete all sections of this form and send with the appropriate fee to the address below. cheques made payable to the Great Britain Diving Federation. Payment can also be made by BACs, account number 40557838 sort code 20-06-09

Nina Mewse, 10, Fieldway, Clayton, Bradford, West Yorks, BD14 6RP.

Fee: Please Circle

Choose Appropriate Category and insert below

Cat A: If you are a competitor, coach, official etc and your club is affiliated to the GBDF.

£12.00

Category: []

Cat B: If you are an individual who is not a member of a club affiliated to the GBDF.

£15.00

Sex: M [] F []

Cat C: If you are a recreational diver, parent or supporter.

£5.00

Fore Name: []

Please TICK appropriate box below

Surname: []

Novice: [] Junior: []

DOB: []

Senior: [] Masters: []

Tel No: []

Teacher: [] Referee: []

Address: []

Assessor: [] Recorder: []

[]

Tutor: [] Judge: []

Announcer: []

Town: []

Regional/Events: (Specify) []

County: []

Director/Governor: " []

P. Code: []

Parent/Guardian/Ward: " []

Club: []

e mail address

DIVERS ARE WARNED THAT RANDOM DRUG TESTING MAY TAKE PLACE DURING THE GBDF CHAMPIONSHIPS.

I (or my parent or guardian if I am under 16 years of age on the first day of the championship (s) I am entering) agree to participate if selected in random drug testing at anytime, either in or out of competition, as organised by the BOA, Sports Council, FINA, LEN or GBDF.

I agree (to my Son/Daughter/Ward)..... if selected being submitted to the medical control procedure approved by the BOA Sports Council, FINA, LEN or GBDF and to him/her submitting a sample of urine for analysis by the accredited laboratory.

Signature..... Date / / Club Membership Number []