

# THE BRITISH SUB-AQUA CLUB Snorkel Training Scheme



## CORPORATE MEMBERSHIP

### APPLICATION FORM

**To:** **BSAC Headquarters**  
**South Pier Road,**  
**Ellesmere Port,**  
**L65 4FL.**

I/We wish to apply for registration as a Corporate Member of the BSAC and its Snorkel Training Scheme.

Name of Organisation.....

Contact Name..... Phone No.....

Contact Name..... Phone No.....

Address.....  
(for invoicing)

Postcode..... Fax No.....

E-mail address..... Website.....

Name(s) of BSAC Qualified Snorkel Instructors:  
(May be completed following Instructor course)

Name..... BSAC Mem No.....

Name..... BSAC Mem No.....

Name..... BSAC Mem No.....

Name..... BSAC Mem No.....

Signature on behalf of Corporate member.....

**This form should be forwarded to BSAC headquarters**

The British Sub-Aqua Club, Telfords Quay  
South Pier Road, Ellesmere Port, CH65 4FL.

For HQ use

Application received..... Acknowledged / confirmed.....

Forwarded to Shop..... Invoice issued.....