



PROFESSIONAL MEMBERSHIP APPLICATION

To apply for membership, please complete the following form and return to DAN via mail@dansa.org or join online at www.dansa.org

This is an annual membership that can only be cancelled after one year.

PERSONAL DETAILS

Title: Name: Surname:

Date of birth: ID/Passport no:

Postal address:

Tel. Home: Tel. work:

Mobile no:

Email:

Class of diver:

Registration no:

Membership choice: Rescue Diver:

Scientific Diver:

Photographic Diver:



Are you in possession of either a DoL, HSE/IMCA or equivalent diving medical certification and are you declared fit for commercial diving?

(Please attach confirmation)

Confirming doctor:

Doctor's tel:

Medical aid name:

Medical aid no:

Medical aid dependents?

Do you have any medical restrictions?

(Attach details if yes)

Do you have any previous cases of DCI?

(Attach details if yes)

Emergency contact name:

Emergency contact tel:

I hereby declare that the particulars and answers given above are, to the best of my knowledge, true and I agree that this declaration shall form the basis of the agreement between Divers Alert Network and me. Furthermore, I understand that it remains a warranty precedent to any liability under the membership benefits to be in a normal and good state of health and likely to remain so for the duration of the membership. This membership can only be cancelled after 12 months and Divers Alert Network must be informed in writing 90 days prior to the annual renewal date.

Membership start date:

(always start on the 1st day of the month)

Add DAN tag?

Additional R35 (Allow 14 working days for delivery)

Add membership card?

Additional R25 (Allow 14 working days for delivery)



FEES & PAYMENT DETAILS

This is an annual membership payable either as a once-off payment or two payments per year. It will remain the responsibility of the diver to ensure his/her second payment is made in time. If the second payment is not made within the first six months, the diver will not be covered for the remaining period.

	Annual	Bi-Annual
Rescue Diver	R3350	R1775
Scientific Diver	R3350	R1775
Photographic Diver	R3350	R1775

DAN Banking Details - Deposits or Transfers

Divers Alert Network

Bank: Nedbank
Branch: Braamfontein
Branch Code: 195005
Account no.: 1950508714
Type: Cheque

Please email the proof of payment, together with your application form, to mail@dansa.org

Credit card details for payment

Name on card:

Card type:
(e.g. Visa, Master Card)

Expiry date:

CVV:
(Last three digits on the back of your card)

Card no:



NEXT OF KIN DETAILS

Title:

Name:

Surname:

Date of birth:

ID/Passport no:

Postal address:

Tel. home:

Tel. work:

Mobile no:

Email:

Relationship to main member: Spouse Parent Child Friend

Note: It remains the member's responsibility to notify DAN if the beneficiary's details change, for example in the case of divorce. I understand that this is an annual membership and I am liable for the full 12 months' membership fees. A notice of 30 days' cancellation must be given. I also understand that DAN membership cover is secondary to any medical aid or other insurance benefits I may have when these apply. Please allow two working days for processing.

You are responsible to ensure that we have your correct contact details and to ensure that your membership is active and paid up to date. DAN makes every possible effort to contact you in the event of non-payment; however, we cannot be held responsible if cover is refused as a result of dishonoured debit orders or unpaid membership fees.

Name:

Surname:

Date: