



Application for SAA-CMAS Certification Card

Section A. *To be completed by the Applicant*

Name: _____	SAA Membership No: _____
Address: _____	SAA Club Name: _____
_____	SAA Club No: _____
City: _____	Telephone: _____
County: _____	Mobile: _____
Country: _____	Email: _____
Post Code: _____	D.O.B. _____ Age: _____
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Existing Diving Grade: _____	Date Obtained: _____
Signature: _____	Date: _____

Section B. *To be completed by the Club Diving Officer*

Club Diving Officer's Name: _____ SAA Membership No: _____

I have inspected the candidate's original certificates and confirm them to be genuine. Furthermore, I endorse this Diver's application

Signature: _____ Date: _____

SAA-CMAS Equivalencies

Open Water Diver	1 Star
* Club Diver	2 Star
Dive Leader	2 Star
Dive Supervisor	3 Star
National Diver	4 Star

To qualify for a CMAS 2* diver a Club diver must complete a further 10 qualifying dives, which must be verified by the Club DO. These dives must be completed in a variety of conditions, no more than 2 qualifying dives in one day or at one site.

These dives cannot be used towards those required for SAA Dive Leader.

Section C. *Information that must accompany this application*

Photocopies of:

Your highest SAA Diving Qualification

Proof Of Additional Dives (If required)

One Current Colour Photograph of yourself (passport size) with your name written on the back

Cheque made payable to the SAA for £12.50

I Wish To Pay By Credit / Debit Card

Card No. _____



Expiry Date: _____ / _____ CSC No. _____

50p Charge for Credit / Debit Card payments

Office Use Only

Grade: _____

Signed: _____ Date: _____

*Please return this form to the address at the top of the page
 Note the information submitted on this form will be stored on a computer system.*