

HSA International  
1104 EL PRADO  
SAN CLEMENTE, CA 92672

## Instructor Training Course Application

**Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First            Middle            Family                                      day    month    year

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**State/Province:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**email:** \_\_\_\_\_ **Web Site:** \_\_\_\_\_

INSTRUCTOR     ASSISTANT INSTRUCTOR (AI)     DIVE MASTER (DM)

**Diver Training Agency** \_\_\_\_\_ **Registration Number** \_\_\_\_\_ **Date Issued** \_\_\_\_\_

### TEACHING STATUS: LIABILITY INSURANCE REQUIRED

I certify that I have complied with the Financial Responsibility Requirements for Active Teaching Status, and that I have named the Handicapped Scuba Association as an Additional Insured. For HSA Teaching Status please provide your PROFESSIONAL UNDERWATER LIABILITY INSURANCE information below.

**Insurance Company Name:** \_\_\_\_\_ **Certificate Number:** \_\_\_\_\_

**Coverage Effective From** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **to** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Signature** \_\_\_\_\_

### HSA COURSE DIRECTOR USE ONLY

**HSA Instructor Number:** \_\_\_\_\_ **Date Issued:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Exam Score:** \_\_\_\_\_ %

**ITC Dates:** Lecture \_\_\_\_\_ Pool \_\_\_\_\_ Open Water \_\_\_\_\_

**Location:** \_\_\_\_\_ **Sponsor:** \_\_\_\_\_

**Open Water Location:** \_\_\_\_\_ **Depth:** \_\_\_\_\_  Beach  Boat

**Comments:** \_\_\_\_\_

**Exam Results:** \_\_\_\_\_

\_\_\_\_\_ **Course Director** \_\_\_\_\_ **CD** \_\_\_\_\_ - \_\_\_\_\_

MERCHANDISE <input type="checkbox"/> Received <input type="checkbox"/> Ship Date Shipped: _____			
Manual: Instructor .....	\$40.00	Quantity _____	\$ _____
Manual: Dive Buddy .....	\$30.00	Quantity _____	\$ _____
Polo Shirts: .....	\$30.00	<input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	Quantity _____
VIDEOS: <input type="checkbox"/> American <input type="checkbox"/> PAL <input type="checkbox"/> DVD.....	\$30.00	Quantity _____	\$ _____
<input type="checkbox"/> Freedom in Depth <input type="checkbox"/> To Fly in Freedom		<b>GRAND TOTAL</b>	<b>\$ _____</b>
<input type="checkbox"/> VISA <input type="checkbox"/> Master Card			
<b>CREDIT CARD NUMBER:</b> _____		<b>Expiration Date</b> _____	