



International Association of Nitrox and Technical Divers/IAND, Inc.

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Instructor/IT Membership Renewal

January 1, 2021 – December 31, 2021

Please Complete All Information on BOTH sides of this form

Please Type or Print Clearly

Name	First	Middle	Last	Inst. #	IT #	ITT#	Birth Date
							DAY / Month / Year
Home Address (has to be in IANTD Jordan Territories) <small>(Jordan, Saudi Arabia, Oman and Qatar)</small>			City	State	Zip	Country	Phone
Mailing Address			City	State	Zip	Country	Cell
Nationality				E-mail Address			

Teaching languages (in order of priority)

You Must Sign the Following Agreement

To my knowledge the above information is correct and complete I have read the accompanying contractual membership and license agreements and I agree to remain in full compliance.

Instructor Signature

Date

By signing this renewal form, I declare that all above details are correct and up to date, that I hold valid professional liability insurance, as well as a current dive medical signed by a physician and that I authorise IANTD, IANTD, Inc. and IANTD Jordan to publish my business contact details on the public instructor listing, including phone number and email address. Also, in case I have chosen to pay my renewal fees by credit card, I allow IANTD and IANTD Jordan to debit my credit card for my renewal, student registrations and bills with IANTD, IAND Inc. or IANTD Jordan. (Jordan, Saudi Arabia, Oman and Qatar)

Level(s) to be Renewed:

- Divemaster
 Supervisor
 Assistant Instructor
 Open Water Instructor
 Nitrox Instructor / IT
 Advanced Nitrox Instructor / IT
 Diver First Aid Instructor / IT
 Technical Instructor / IT
 Normoxic Instructor / IT
 Trimix Instructor / IT
 Other: _____
 Other: _____

IANTD - Jordan Use Only	Date Received	Date Processed
Notes	Initials	Invoice

**You must sign and complete ONE of the following 4 options:
(Diver's Physicals or VO₂ Max tests must be no older than 3 months)**

1. Option 1

Attach a copy of a Diver's Physical from a Physician.

Instructor Signature _____

2. Option 2

Complete the Mandatory Watermanship Evaluations on pages 43 and 44 in the 2001 IANTD **Standards and Procedures**.

- Skill One Points _____
- Skill Two Points _____
- Skill Three Points _____
- Skill Four Points _____
- Skill Five Points _____

Instructor Signature _____ Witness Signature _____

3. Option 3

Take and pass (score of average or above) a VO₂ Max test and attach a copy of the test results.

Date of test _____

- Administrator of VO₂ Test _____
- VO₂ Max Score _____

Instructor Signature _____

4. Option 4

I verify that I participate in a regular routine of physical fitness training and maintain myself in a state of fitness that allows for safe and responsible in-water training sessions.

- Attached is my Copy of the IANTD Medical Questionnaire (From any IANTD Student Manual) that I have filled out completely.

Instructor Signature _____

All Instructors Operating within International Licensee Territories must contact the appropriate Licensee Office for membership renewal information. Any questions concerning Licensee membership please contact HQ or your local IANTD Licensee.

Please Note You will receive **ONE INSTRUCTOR LEVEL C-CARD** for the **highest INSTRUCTOR** Certification level you have.