## **Federation of Underwater Activities Malta**



## **CMAS NORMOXIC TRIMIX DIVER**

## **Positive Identification Card**



**PLEASE AFFIX HERE** ONE **PASSPORT PHOTO** 

TO BE FILLED BY S	STUDENT IN BLOCK CAPITA	LLETTERS					
FIRST NAME		SURNAME					
ADDRESS							
TOWN	POST CODE		COUNTRY				
DATE OF BIRTH d-m-y TELEPHONE N°		NATIONALIT	Y				
EMAIL		PRIVACY	"Personal data pro	ovided here will be p	rocessed as per		
		NOTICE FUAM's Privacy Notice, a copy of which is available on the FUAM Website: www.fuam.org.mt"					
			the FUAINI Website	. www.iuaiii.org.iiit			
BE FILLED BY THE INSTRUCTOR IN BLOCK CAPITAL LETTERS	3		the FUAM Website	. www.iuaiii.org.iiit			
BE FILLED BY THE INSTRUCTOR IN BLOCK CAPITAL LETTERS INSTRUCTOR'S SURNAME	3	INSTRUCTO	THE FUAM WEDSITE	. www.iuaiii.org.iiic			
		INSTRUCTO		www.ruam.org.mc			
				www.iuaiii.org.iiit			
INSTRUCTOR'S SURNAME			R'S FIRST NAME	. www.ruam.org.mc			

The Federation of Underwater Activities of Malta in conjunction with the Confédération Mondiale des Activités Subaquatiques would like to congratulate you on your success in achieving the Normoxic Trimix Diver CMAS qualification standards.

A Internationally recognised CMAS/FUAM Personal Identification Card will be issued.

SCHOOL'S / CLUB NAME															
O.C.C. SCHOOL N°															
			·	·	·		SCHOOL'S / CLUB'S RUBBER STAMP								