This course has been designed by the Underwater Centre Fremantle, to introduce engineers and other interested professionals to offshore diving operations.

The objectives of the course are as follows:

- To introduce the various codes, standards and regulations relevant to diving and ROV operations offshore.
- To introduce different diving techniques and illustrate the abilities/limitations for each.
- To display typical diving and ROV equipment to ensure familiarity.

The course allows those participants with recreational diving qualifications to undertake dives in a decompression chamber. Each student who wishes to participate in the chamber dive will be required to meet the following prerequisites prior to diving on the course:

- PADI Open Water Diver or approved equivalent.
- 18 years of age
- Medically in date (to recreational standard AS4005.1. This means if they are under 30 years old they must have one in the last 5 years, if they are between 30 and 50 years old they must have one in the last 3 years, and if they are over 50 they must have one in the last 12 months.)

Diving participants will be required to complete:

- PADI Medical Statement.
- TUCF Statement of Understanding.

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**PROGRAMME**

08.30  Course Introduction
09.00  Legislation & Guidance
10.00  Break
10.15  Review the types of structures found offshore (from a diver’s perspective)
11.15  Review the range of ROV operations and explain the different classes of ROV
12.00  Lunch
12.30  Recompression Chambers
12.45  Practical Training Activity (DDC) – Decompression Chamber dive
14.45  Break
15.00  Display different items of the diving spread and how they operate
15.30  Review a display of typical offshore air spread, Submarine Rescue Vehicle, ROV(s), and rock boltig rig
16.45  Course debrief
17.00  Finish
Registration Information — Introduction to Offshore Diving  
(Dec 2013)

For further information on this event please contact Jennifer Maninin on j.maninin@sut.org Tel.+61(8) 9446 9903
To register, either e-mail the information required on the registration form to Perthevents@sut.org or fax the completed form to + 61 (8) 9446 9905

Registration Fees
SUT Members $500 + GST = $550
Non Member $600 + GST = $660

Included in the Fees: All refreshments during the Course and copy of the Course notes.

Preferred Payment Methods:

☐ Credit Card: * AMEX, Mastercard or Visa ONLY. We cannot accept payment by any other card.

*Payments made by AMEX will attract a 2.75% surcharge.

☐ Cheque: Australian Dollar only, made payable to The Society for Underwater Technology
Send to, 5/5 Hasler Road, Osborne Park, WA, 6017.

Please make sure you reserve a place by e-mail or fax before posting your cheque.

☐ Invoice: Please provide PO. No (if this is your organisations policy) ____________________________

Joining Instructions:
Joining instructions will be e-mailed to the registered delegate (as shown on the registration form). All details of Venues, lecturers and updates to the programme will be included in the joining instructions.

Cancellations:
Refunds will be made on written cancellation received up to ten working days in advance of the event, but will be subject to a 15% handling charge. 50% will be deducted up to three working days in advance and 100% thereafter up to the start of the event. No refund will be given for non-attendance. Delegates may wish to nominate a substitute in their place.

Transport During the Course:
Delegates are responsible for their own travel arrangements at the beginning and end of each day.

SUT reserves the right to change/update the programme as it sees fit.

Registration Form

Please e-mail details to Perthevents@sut.org or fax the completed form to (08) 9446 9905

SUT Member No. ________________________

Please tick to indicate your preferred payment method:

Credit Card ____ (Visa or MasterCard)  Cheque ____  Invoice (PO No.) ____________________________

Name ____________________________________________________________

Company ________________________________________________________

Address _________________________________________________________

E-mail address ____________________________  Tel No. ______________________

Credit Card No: AMEX, VISA or MASTER CARD ONLY. ___________________ / ______________ / __________ / __________ / __________

Exp. _____ / _______  Security no _________ (last 3 digits on the back of your card)

Name on the card ___________________________________________________

Billing Address if not as above _______________________________________

_______________________________________________________________

E-mail address where receipt to be sent for credit card payment

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Amount to be charged $ ___________  Signature ________________________________________