

MEMBERSHIP APPLICATION FORM & CONFIDENTIALITY AGREEMENT

- Name:
- ID#:
- Address:
- Email:
- Occupation:
- Affiliation:

I hereby apply for Membership to the Caribbean Speleological Society Association. I agree to be bound and comply with all the existing norms and regulations of the society, of which I'm knowledgeable. I also understand that membership is not valid until I have received written acceptance into the society.

As a member of Caribbean Speleological Society (CARIBSS), I understand that I may have access to confidential information about caves. By signing this statement, I am indicating my understanding of my responsibilities to maintain confidentiality and agree to the following:

• I understand that names, locations and any kind of findings like art objects, human remains, ceramics, paleontological material, objects of scientific interest and any other information about cave sites are completely confidential.

• I agree not to divulge, publish, or otherwise make known to unauthorized persons or to the public any information obtained in the course of the cave projects, unless specifically authorized to do so by approved protocol followed by the Board of Directors.

• I agree to notify the President of CARIBSS or, in his/her absence, any other board member immediately should I become aware of an actual breach of confidentiality or a situation, which could potentially result in a breach, whether this be on my part or on the part of another person.

Signature_____

Place and date _____

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