

Jervis Bay Divers Club Inc.

3 Ringbalin Cres. Bomaderry NSW 2541

Email: secretary@jervisbaydivers.org

APPLICATION FORM FAMILY MEMBERSHIP

[Members of the 'Family Membership' must co-habitat on the same premises]

Incorporated. of the Associat	In the event of our tion from time to tire	admission as membe	ers we agree that we	me members of the Jervis Bay Divers Club e will be bound by the rules and the bylaws e: Instructional Organisation and Level achieved
No 1 2		1 .		
1 2	Christian Name	Date of Birth	Diver Yes/No	Instructional Organisation and Level achieved
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2		ĺ		
3				
4				
5				
Brief resume of	diving experience and	d any special interests i	n diving:	
		Conta	ct Information	· · · · · · · · · · · · · · · · · · ·
Address				Post Code
Mobile Phone _			Home Phone	
Work Phone :		Email [<i>print clearly)</i>		
Occupation/s				
		a wn to me , for member		s Bay Divers Club Inc. nominate the n.
Signature of Proposer:			Date :	

Return this application and \$30 membership fee with photocopies of your certification cards to a committee member, mail to 3 Ringbalin Cres Bomaderry 2541 or email to membership1@jervisbaydivers.org

EFT payments can be made to BSB 641-800 Acct # 036105185