## This is your application form for the Council of Divers Dues are \$15, or for 2 at the same adress; \$25

Instructions at the bottom of the page allow you to email this form. Payment can be made later at a meeting, or mail a check to: San Diego Council of Divers P.O. Box 421393 San Diego, CA 92142

Or, add a dollar and paypal it to secretary@sddivers.com

Some fields can be blank - That's ok.

Current Date	If a Couple, fill out 2nd column below t	00
First Name	Other First Name	
Last Name	Other Last Name	Street Address
Choose Club	Choose club	City
Choose type of member	Choose type of member	State
email	email	Zip code
Choose Cert	Choose Cert	
Choose Agency	Choose Agency	
(Type in phone numbers as just 10 digits)		
Home Phone		
Work	Work	
Cell	Cell	
Your dive related interests Occupation/ Special Skills		

## Information you supply will not be shared with anyone.

Now to send it off, pick your situation

