



## KittyHawk Scuba Club 2007 Membership Application Form

Member #1

Name: _____	Birthdate: _____ Sex: M / F
Certification Level: _____	Certifying Agency: _____
Instructor's Name: _____	Instructor's #: _____
DAN Member: Y / N	DAN Membership #: _____
	DAN Expiration Date: _____

Member #2:

Name: _____	Birthdate: _____ Sex: M / F
Certification Level: _____	Certifying Agency: _____
Instructor's Name: _____	Instructor's #: _____
DAN Member: Y / N	DAN Membership #: _____
	DAN Expiration Date: _____

Others Members:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Diver: Y / N

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Diver: Y / N

Mailing Address:

\_\_\_\_\_ Home #: \_\_\_\_\_

\_\_\_\_\_ Work #: \_\_\_\_\_

Email: \_\_\_\_\_ Fax #: \_\_\_\_\_

(Somebody to notify that does not live at your home address)

In Case of Emergency:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Liability Release:

I hereby release the KittyHawk Scuba Club, or any officers thereof, from any responsibility and liability in the event of an accident or injury sustained while participating in club-sponsored or recognized diving, training, or other planned activity. I accept all legal and moral responsibility for myself, my minor dependents and any guests accompanying me.

Member #1: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Member #2: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorization for Participation of Minor Dependents:

I hereby authorize my son/daughter indicated in the application above to join and participate in the activities of the KittyHawk Scuba Club. I release the KittyHawk Scuba Club, or any officers thereof, from any responsibility or liability as indicated in the above signed release.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Individual Membership (one year) - \$15.00

\_\_\_\_\_ OCSSDI Membership - \$ 9.00

\_\_\_\_\_ Individual & Spouse (one year) - \$20.00

Amount Enclosed: \_\_\_\_\_

(New Members after June 1 will be charged 50% of the yearly fees.)

### Club Secretary Use Only

_____ KSC dues rcv'd	_____ OCSSDI dues rcv'd	
To Treasurer _____	To Publisher _____	To OCSSDI _____