



**EXPLORERS DIVE CLUB, INC.  
APPLICATION FOR MEMBERSHIP**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Certifying Agency: \_\_\_\_\_ Card No.: \_\_\_\_\_

Approx No. of Dives: \_\_\_\_\_ No. of Years Diving: \_\_\_\_\_

**Dive Interests: (Check all that apply)**

- |                                              |                                                  |                                       |
|----------------------------------------------|--------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> New Jersey          | <input type="checkbox"/> UW Photo/Video          | <input type="checkbox"/> Spearfishing |
| <input type="checkbox"/> Boat diving         | <input type="checkbox"/> Night diving            | <input type="checkbox"/> Lobstering   |
| <input type="checkbox"/> Wreck diving        | <input type="checkbox"/> Quarry diving           | <input type="checkbox"/> Inlet diving |
| <input type="checkbox"/> Tropical diving     | <input type="checkbox"/> Decompression diving    | <input type="checkbox"/> Ice diving   |
| <input type="checkbox"/> Club dive vacations | <input type="checkbox"/> Artifact/Salvage diving | <input type="checkbox"/> Writing      |

Other dive interests: \_\_\_\_\_

**Membership Fees**

Individual - \$40.00 per year (pro-rated at time of acceptance)

Family - \$50.00 per year (pro-rated at time of acceptance)

**IMPORTANT: Membership is contingent upon presentation of a valid C-card, timely payment of dues, and a signed general waiver.**

Make checks payable to: **Explorers Dive Club**

Payment Rec'd: \_\_\_\_\_