

CANTERBURY UNDERWATER CLUB INC
P.O. Box 2287 Christchurch
MEMBERSHIP APPLICATION FORM

I, (Name in Full)

wish to become a member of the Canterbury Underwater Club Incorporated and enjoy the full benefits the club has to offer, the fellowship of the members and agree to abide by the rules of the club. **Note. Membership restricted to divers and partners only.**

Signed Date/...../.....

AddressPostcode.....

Ph Home Work Occupation

Cell Phone Email Confirm all Lower Case

Married / Single / Defacto Partners name

Parents or Guardians signature Date of Birth / /
(If under 18 years)

Membership applying for : Junior (under 18) Senior Couple (Two Forms Reqd)

I hereby give permission for the above information to be included in the club membership listing which is circulated to members of the Canterbury Underwater Club Inc and to our National Affiliated Body.

YES NO Signed

1. Are you currently a qualified diver ? YES / NO

If you answered "yes" please record what qualifications you hold: (If you answered "NO" please state your intentions)

.....Date of Qualification? / /

2. What are your current diving interests : (circle as necessary)

Wreck diving / Photography / Spearfishing / Cave diving / Crayfishing / Scallops / Scenic / Night diving

3. How often do you dive per year on average?

4. Do you own a boat? Yes / No If "Yes", please state what type;.....

5. Do you intend to regularly attend club meetings? Yes / No

6. Have you been in another dive club before? Yes / No

7. How did you hear about the Canterbury Underwater Club?.....

8. What is the most important thing for you to get out of your club membership?

PLEASE ENSURE YOU HAVE BEEN NOMINATED & SECONDED PRIOR TO SUBMITTING YOUR APPLICATION.

Nominated by: Name Signature

Seconded by: Name Signature

NOTE - Nominator and Seconder must be Financial Members.

See our web site for committee contact details: <http://www.canterburyunderwater.org.nz>

Enclose cheque with application as per fee scale on reverse side.

OFFICIAL USE ONLY

Joining Fee \$..... Subscription \$..... Total Paid \$..... Date / /

Treasurer Secretary Editor New Member Kit / Letter