

Office Use:
ID Number

**Membership Application – Single Individual**

Once complete post to the address indicated below, scan it and email to [info@surg.org.au](mailto:info@surg.org.au) or bring it along to a SURG meeting. Membership is contingent on payment of joining fee.

**Member Details**

First Name	Surname	Gender
St Address		
Date of Birth	Home Phone	Mobile
Email Address		
Next of Kin	Relationship	Phone
Choose Member Type: Diver	Non Diver	Snorkeller
Highest Dive Qualification	Certifying Body	
O <sub>2</sub> Qualification	First Aid	
Date of Last Dive	Estimated Total Dives	Dives in Last Year

Your skills / interests (*Please list those appropriate*) e.g. conservation, underwater photography, marine awareness, first aid, web skills/IT, compiling grant applications, surveys, research, event coordination, other:

**As a member of SURG Inc. I agree to be bound by the constitution of the association for the time being in force (available at <http://www.surg.org.au>), and to participate in events and activities following SURG's diving procedures.**

Signature ..... Date .....

If under 18 years, Parent / Guardian name

Signature of Parent / Guardian ..... Date .....

**Annual Membership from 1<sup>st</sup> July to 30<sup>th</sup> June**

Single \$20 Family \$35 Student \$12 (*Fees include GST. Please ask if you require a receipt or tax invoice*)

**Please make cheque payable to SURG and post to PO Box 4096 Coffs Harbour Jetty NSW 2450**

**Direct deposit details** - Banana Coast Credit Union BSB 533 000, Account number 43996 (\$11)

(*Please quote name in Transaction Description*)