SOLITARY ISLANDS UNDERWATER RESEARCH GROUP, INC.

Membership Application

For **Student** or **Single** memberships please fill out Member 1 only.

For **Family** memberships fill out details for each individual member. For family memberships with more than 2 people please complete additional forms and send together.

Member Details

Member 1 :

Category: Non-Diver

First Name: Surname: Date of birth:

Email address:

Street Address:

Phone: Gender: Female

Next of kin

Name: Relationship: Phone:

Dive information (Only if member type – **Diver** above)

Dive Qualification: Certifying Body: Other: Please specify

#Dives total: Date of last dive: # Dives in last 12 months:

First Aid: No Expiry: O_2 Qualification: Yes Expiry:

Please list any relevant skills and interests eg. Marine conservation, underwater photography, research, event coordination, grant writing, web skills:

Member 2 :

Category: Snorkeller

First Name: Surname: Date of birth:

Email address:

Street Address:

Phone: Gender: Female

Next of kin

Name: Relationship: Phone:

Dive information (Only if member type – **Diver** above)

Dive Qualification: Certifying Body: Other: Please specify

#Dives total: Date of last dive: # Dives in last 12 months:

First Aid: No Expiry: O_2 Qualification: No Expiry:

Please list any relevant skills and interests eg. Marine conservation, underwater photography, research, event coordination, grant writing, web skills:

I/We agree that, as members of SURG Inc. to be bound by the constitution of the Association for the time being in force, and to participate in events and activities following SURG diving procedures.

Name:

Signature: Date:

Name:

Signature: Date:

If under 18, Parent/Guardian Name:

Signature of Parent/Guardian: Date:

Please return completed forms:

By email to membership@surg.org.au

By post to PO Box 4096 Coffs Harbour Jetty NSW 2450

Or return in -person at a SURG meeting

Annual Membership: July 1 – June 30

Student $15 *Single* $25 *Family* $40

Direct deposit details

Bank Banana Coast Credit Union *Account name* Solitary Islands Underwater Research Group, Inc.

BSB 533 000 *Account number* 32819695

Please ensure your name is in the reference field so the payment can be assigned to you.

Note: Membership is not confirmed until payment is received.

Office use only:

ID number

Member 1:

Member 2: