



Membership Application

Atomic Ducks Dive Club

P.O. Box 2032
Richland, WA 99352

Membership Year: _____

Primary Member

Name:		Email Address:	
Home Phone:	Cell Phone:	Work Phone:	
Address:		City:	State: Zip:
Certifying Organization:		Certification Number:	
Certification Level:		Date Certified:	

Family Member (1)

Name:		Email Address:	
Home Phone:	Cell Phone:	Work Phone:	
Certifying Organization:		Certification Number:	
Certification Level:		Date Certified:	

Family Member (2)

Name:		Email Address:	
Home Phone:	Cell Phone:	Work Phone:	
Certifying Organization:		Certification Number:	
Certification Level:		Date Certified:	

Annual Membership Dues

<p>Check One:</p> <p><input type="checkbox"/> Individual - \$35 <input type="checkbox"/> New Membership - Free *</p> <p><input type="checkbox"/> Family - \$50 <input type="checkbox"/> New Prorated * - _____</p>	<p>Mail payment to:</p> <p>Atomic Ducks Dive Club PO Box 2032, Richland, WA 99352 -OR- Pay online at www.ducksdiveclub.org</p>
<p>* First year free for new divers. New memberships prorated after June. See website for details.</p>	

*** Your personal information is for internal club use only and never shared with non club members. ***