

Atlanta Reef Dwellers Scuba Club– Membership Application

Date: _____ **New Application Renewal Individual (\$30/yr) Family (\$50/yr)**

Primary Applicant: _____

Email Address: _____

Home Phone _____ Cell Phone _____

If this is a family membership application, please list all other family members included in this membership:

(If necessary, please use reverse side to list additional applicants.)

Spouse (if applicable): _____ Email Address: _____

Other: _____ Email Address: _____

Other: _____ Email Address: _____

Release of Liability:

The undersigned, as a condition of membership in the Atlanta Reef Dwellers Scuba Club, acknowledges their understanding that skin and scuba diving involve exceptional risks, which the applicant voluntarily assumes. The undersigned assumes all responsibility for their own safety, including the responsibility for good diving practices, properly maintained equipment, and all other diving-related decisions. The undersigned hereby releases the Atlanta Reef Dwellers Scuba Club, all its members and its officers from any and all responsibility in connection with any recreational activities, including, but not limited to, skin and scuba diving activities participated in by the undersigned.

Signatures:

Primary: _____ Date: _____

Spouse: _____ Date: _____

Other: _____ Date: _____

Other: _____ Date: _____

Emergency Notification Information (Optional)

Contact: _____

Day Phone _____ Night Phone _____

Mailing Address _____

City _____ State _____ Zip _____

Mail this application, along with payment, to:

Atlanta Reef Dwellers Scuba Club

Mailing Address:

5492 Twin Oak Drive

Douglasville, Georgia 30135 USA

Website: <http://www.atlantareefdwellers.org>