

INTERNATIONAL FELLOWSHIP OF ROTARIAN SCUBA DIVERS

Membership Application

Last Name (Family Name)	First Name (Given Name)	Middle Initial
Street address - 1		
Street address - 2		
City	State or Provenance	Postal Code
Country		
Telephone	Fax	Email

Rotary Club membership:		
Club Name	Club Number	District Number

Scuba Diving Data:	
Scuba Diving Certification Organization	How many dives have you made?
Highest Level of Certification	Location of last dive
Date of Certification	Date of last dive

Trip planning information:

		Yes	No
Do you prefer:	Land base dive trip		
	Live aboard boat		
	Either		

Where do you want to dive (10 most preferred, 0 least preferred):

N. Atlantic	Caribbean	Asia	S. Pacific	Great Lakes	Other

Name: _____

Would you most likely be traveling alone? Yes / No

If someone(s) would be traveling with you, would they be a certified diver? Yes / No

How many people would be traveling with you? _____

Dues are US\$15 per year or three (3) years for US\$40. Personal checks are accepted if written on a US bank account, otherwise Travelers' Checks or Money Orders. Financial instruments should be made payable to the International Fellowship of Rotarian Scuba Divers (IFRSD). This application and your financial instrument should be mailed to IFRSD, c/o Greg Stirneman, 2011 S. Jackson St. Jacksonville, Texas, 75766 U.S.A.