DIVER REGISTRATION FORM

CUSTOMER #

Date	BC	Reg	Mask / Snorkel	Fins	Wet Suit	Dive Computer	A.M. Boat Trip	P.M. Boat Trip	Night Dive	Other Charges	Totals

WHEN A JOB IS WELL DONE TIPS ARE APPRECIATED

PLEASE PRINT IN BLOCK LETTERS

NAME_____

ADDRESS _____

CITY & STATE _____

ZIP CODE _____

HOME PHONE # _____

E-MAIL_____

HOTEL & ROOM # _____

DATE OF BIRTH_____

DATE OF DEPARTURE FROM NASSAU _____

DIVING CERTIFICATION INFORMATION

CERTIFYING AGENCY (e.g. PADI) _____

CERTIFICATION LEVEL_____

STUDENT #_____

CERTIFICATION DATE_____

NUMBER OF DIVES DONE_____

DATE OF LAST DIVE_____

LOCATION OF LAST DIVE _____

HOW DID YOU HERE ABOUT US?

- ☐ SKIN DIVER MAGAZINE
- ☐ RODALE'S SCUBA DIVING
- ☐ WHAT'S ON (NASSAU)
- ☐ ISLAND MAPS
- ☐ WHAT TO DO
- ☐ TRAILBLAZER MAPS
- ☐ WELCOME (in room book)
- ☐ TOURIST NEWS
- ☐ HOTEL TOUR DESK
- ☐ BELLMAN/CONCIERGE
- ☐ BROCHURE
- ☐ YELLOW PAGES
- ☐ TRAVEL AGENT
- ☐ DIVE SHOP
- ☐ INSTRUCTOR
- ☐ BEEN HERE BEFORE
- ☐ FRIEND
- ☐ INTERNET
- ☐ TELEVISION
- ☐ OTHER

_____

Please Specify