

Berea Diving Club

Diver Registration Form

Diver Name: _____ Grade: _____

Birthdate: _____ Age: _____

Address: _____

City: _____ Zip: _____

School: _____

High School: _____

**School diver is planning on attending if not in HS now*

Parents Name: Father: _____ Mother: _____

Phone: (Home): _____ (Cell) _____

(Work): _____ (Cell) _____

Email Address:(main) _____

(secondary) _____

*****Email will be the main communication between the Berea Diving Club and parents of club members.***