



CHRISTAL SEAS SCUBA
CLUB MEMBERSHIP

NAME(S)

ADDRESS

TEL

MOB

EMAIL

QUALIFICATIONS

DOB

TYPE OF CLUB MEMBERSHIP: SILVER / GOLD / PLATINUM

IN CASE OF EMERGENCY CONTACT

.....
.....

SIGNED

SIGNED

DATE

I WISH TO RECEIVE SPECIAL OFFERS AND PROMOTIONS **YES / NO**

DISCOUNT APPLICABLE ON PRESENTATION OF CLUB CARD ONLY.

PADI 5 * IDC DIVE CENTRE S - 35061
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