

Finger lakes Underwater Preservation Association

MEMBERSHIP FORM

Name:

Address:

Phone Number

E-Mail:

Certification Agency

Certification Number:

Emergency Contact

Name:

Address

Phone Number:

Members Signature _____ Date: _____

Amount Paid

Receipt Number

Mail to:

Joseph Pound
9054 Watson Creek Rd.
Lindley NY 14858

or

Robert Byland
30 Brookside Circle
Elmira, NY 14903

Scuba Instructor
SDI 5659 PDIC 75414