



ERDI Diver Registration Form

1321 SE Decker Ave Stuart, FL 34994

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www.tdisdi.com

Method of Payment

AMEX ☐, MasterCard ☐, Visa ☐, Check ☐ or Money Order ☐ Make Checks Payable to International Training

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Exp. Date:

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Signature:

Course:

Check only ONE course per diver registration form

☐ ERD I

☐ ERD II

☐ ERD Tender

☐ Ops Component (Specify):

Level of participation Awareness ☐ Operations ☐ Technician ☐

CERTIFICATION FEE: ☐ C-Card Only* ☐ C-Card and Certificate*

*Refer to current price list. All diver c-cards & certificates are sent directly to the instructor or facility

Print name as it is to
appear on C-Card

Complete mailing address
(include City, State and Postal Code)

Phone number
E-mail address

DOB (mm/dd/yyyy):

DOB (mm/dd/yyyy):

DOB (mm/dd/yyyy):

DOB (mm/dd/yyyy):

DOB (mm/dd/yyyy):

Course Completion Date (mm/dd/yy):

2nd Inst./Asst. by:

#:

☐ Freshwater

Max training depth:

☐ Saltwater

(Metre / feet):

Location/Facility:

Instructor Name:

Facility Number:

Instructor's ERDI #:

Ship To Address:

Instructor Phone #:

Instructor Address:

I certify that the above named students have completed the ERDI training course indicated and have reached the proficiency level required by ERDI Standards before issuing these certifications. In addition, I agree to void all cards not issued within six months.

City:

State:

Zip (or postal code):

Instructor Signature (Required on each Form)

Date Signed

Country: