PITTSBUGH ZOO & PPG AQUARIUM
VOLUNTEER DIVER PROGRAM APPLICATION

Name | Date (M/D/Y) | Age

( ) -

Phone | Email

Address

Emergency Contact Person | Emergency Contact Telephone

Certification Agency(PADI) | Certification Level | Certification Number

Instructor number | Certification Date (M/D/Y)

Total number of dives | Dives within last year | Cold water diver (40-60F)?

We request all volunteers dive at least once a month.

Can you commit to one dive per month? Y/ N

How often can you dive per month or week?

Signature

Please send to: *PPG Aquarium Volunteer Diver Program, One Wild Place, Pittsburgh, PA 15206*
Or email to: *akidd@pittsburghzoo.org*

For Office Use Only

Date	AAUS forms	Waiver	Manual	Equip Maint	First Aid/CPR	C-Card	DAN	Checkout
Received								
Notes								