

Name: \_\_\_\_\_

**JACKSONVILLE REEF RESEARCH TEAM, INC.**  
**DIVERS ACTIVITY STATEMENT**

**Instruction:**

Highest Level of Certification & Agency: \_\_\_\_\_

Most Recent Diving Certification: \_\_\_\_\_ Date: \_\_\_\_\_

Enriched Air Nitrox Certified?  no  yes Agency: \_\_\_\_\_ Date: \_\_\_\_\_

CPR Certified / Current?  no  yes Agency: \_\_\_\_\_ Date: \_\_\_\_\_

First Aid Certified / Current?  no  yes Agency: \_\_\_\_\_ Date: \_\_\_\_\_

Oxygen Provider Cert. / Curt.?  no  yes Agency: \_\_\_\_\_ Date: \_\_\_\_\_

**Diving During The Past 12 Months:**

General Location	No. Dives	No. Dives Below 60'	Maximum Depth

Comments:  
\_\_\_\_\_  
\_\_\_\_\_

Information I have provided about my diving activity & history is accurate to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date