



International Training

ERD SUPERVISOR REGISTRATION FORM

Directions: Please scan and send digitally. Include signed International Training Member Agreement when registering a new member. Member Agreement located in agency standards.

**Certificates and cards are sent directly to the instructor or facility.
Add \$5.00 for shipping outside the U.S.**

Certification Fee: * Refer to current price list

Print name as it is to appear on certification card:	_____
Date of Birth	_____
Complete mailing address (including City, State and Postal code)	_____ _____
Phone number	_____
E-mail address	_____

Course Completion Date: _____ / _____ / _____ Max training depth: _____ M Ft Freshwater Saltwater
Day / Month / Year

Instructor Name: _____ ERDI Instr. #: _____ ERDI Instr. 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.

Instructor Signature: _____ Date: _____ / _____ / _____
Day / Month / Year

2nd Inst. / Asst. by: _____ Instr. #: _____

Location/Facility: _____ Facility #: _____

Ship To Address: _____
Add \$5.00 for shipping outside USA.

City: _____ State: _____

Zip (or postal code): _____ Country: _____