



**Commander
Cody
Caving
Club**



CCCC Membership Form

Name _____

Address _____

All information here is for club and NSS use only and may be published in our newsletter.

Please do not publish my:

Name

Address

Phone Numbers

Extra Info

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Fax Number: _____

Email Address: _____

Payment Services



Extra Information

Is CCCC Your primary (or only) NSS club/grotto. Yes No

NSS Member No Yes NSS Number

Caving Experience Yes No Equipment? Yes No

Vertical Caving Experience Yes No Equipment? Yes No

Other caving interests:

Cave Diving

Verticle

Rescue

Photography

Mapping and/or Surveys

Conservation

Expedition Support (Sherpa)

Other _____

Noncaving interest and hobbies:

Emergency Information (optional)

EMT, First aid type training: _____

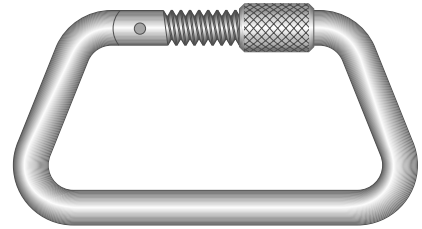
NCRC or other cave rescue: _____

In case of an accident notify:
Relationship:

Name:

Address:

Phone _____



Equipment Color Code :

Other Equipment marking:

Please list all medical conditions that may affect you as a caver (heart disease, epilepsy, allergies, etc.), along with any prescription drug that you take on a regular basis, in the space below.

One CCCC membership (single or family*) costs \$5.00 for one fun filled year. Membership entitles you to rent club equipment, go on club sponsored trips, receive a one year subscription to our newsletter *The Commander Cody Chronicle*. To join the Commander Cody Caving Club make a check or money order payable to Judy Obez and send it to:

CCCC
P.O. Box 304
Rockland, DE 19732-0304



* Family membership: any number of people living at one mailing address.
Please fill out one copy of this form for each family member who will be in the club, send them all in with the \$5.00/year membership fee.