Scuba Diving Gear Record Sheet

Name:	ame: Birth date:				
Address:			City:		
State:	Zip:	Zip: Phone (H):			
Cell:		_E-mail:			
Gear Set #:_		Color:		Style:	
Wet Suit:					
Shorty Style: _	mm:	Size : _	#:_	Make:	
Full Style:	mm:	Size :	_ #:	Make:	
Weight:					
Fresh:	Exposure:	·		Exposure:	
Salt:	_Exposure: _			Exposure:	
Comments:					