

Dive		Temp		Vis	Air		Depth	Hours
#	Date	Air	Btm		Start	End		Start

Location: _____

Purpose: _____ **Buddy:** _____

Conditions: _____

Notes: _____

Dive Plan:

PD _____ (A)MDT _____ Stop _____

PD+ _____ (A)MDT _____ RNT _____

ADT _____

TNT _____

Fresh Salt Shore
 Boat Waves Surf
 Current _____

Altitude: _____

Protection: _____

Tables: <input type="checkbox"/> Computer <input type="checkbox"/> PADI <input type="checkbox"/> NAUI <input type="checkbox"/> Other _____	Gas: <input type="checkbox"/> Air <input type="checkbox"/> Nitrox _____ <input type="checkbox"/> Other _____	PPO₂ _____	Weight <input type="checkbox"/> lbs <input type="checkbox"/> kg
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Additional Notes: _____

Map/Diagram:

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