NISCA ALL AMERICA DIVING
Signature Verification Card
(Please print neatly)

First Name ___________________________ Last Name ___________________________

High School _________________________________________________________________

Diver's email ___________________________ Grade ___________________________

Verification

<table>
<thead>
<tr>
<th>DATE</th>
<th>DIVING MEET</th>
<th>SCORE</th>
<th>PLACE</th>
</tr>
</thead>
</table>

REF’S SIGNATURE (NUMBER) ___________________________

MEET MANAGER’S SIGNATURE ___________________________

Diving Coach ___________________________ Phone # ___________________________

Diving Coach’s email ___________________________

Include this form with your application, DVD, diving sheet, copy of payment, and the diving results
www.niscaonline.org

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