NATIONAL INTERSCHOLASTIC SWIMMING COACHES ASSOCIATION OF AMERICA, INC.

ALL-AMERICAN RE-ORDER FORM

SWIMMING, DIVING, WATER POLO AND ACADEMIC

Use one order form for each event.

Additional All-America and Honorable Mention All-America certificates, as well as beautifully embroidered All-America emblems may be purchased by filling out the order form below. PLEASE COPY THIS FORM TO MAKE ENOUGH FORMS FOR *EACH EVENT* YOU ARE ORDERING.

Prices for the certificates and emblems are as follows:

Item	Member	NISCA	Non-Member	Number Ordered	Total Amount
Individual/Relay Event All-America Certificate		$ 5.00	$ 20.00		
Scholar Team Certificate		$ 5.00	$ 20.00		
Embroidered All-America Emblem - PAT-NIS40		$ 5.00	$ 20.00		
All-America Ornament – ACR-NISOR		$ 14.95	$ 14.95		
All-America Medallion w/velour box - CM-NIS25		$ 16.95	$ 16.95		
All-America Acrylic Award - Full Color - ACR-NISC57		$ 29.95	$ 29.95		
All-America Watches (Male/Female) - WAT-NISCA		$ 39.95	$ 39.95		
All-America Plaques - Cert W/Acyrlic Overlay - PQ-NISFAC		$ 49.95	$ 49.95		
All-America Plaques - Etched Black Brass - PQ-NISFDE		$ 54.95	$ 54.95		
All-America Plaques - Laminated - PQ-NISLAM		$ 79.95	$ 79.95		
All-America Plaques - Acrylic Stand-Off - PQ-NISACR		$ 79.95	$ 79.95		
All-America Rings (visit chris.curtis@jostens.com)					

Total Amount Included: $ _____

For information on the full line of All-American merchandise go to http://www.niscaonline.org/AwardPrograms/AwardOptions.aspx

*** DO NOT RETURN CERTIFICATE WITH ORDER**

Check appropriate boxes and fill in information *(please print):*

Event	Male	Female	Public School	Independent School
1.200 Medley Relay	5. Diving		9. 200 Free Relay	13.Water Polo Team
2.200 Freestyle	6. 100 Butterfly		10. 100 Backstroke	Team # _____
3.200 Individual Medley	7. 100 Freestyle		11. 100 Breaststroke	
4.50 Freestyle	8. 500 Freestyle		12. 400 Free Relay	

LAST FIRST

Shipping Address

NUMBER STREET

CITY STATE ZIP

AREA NUMBER email _____

Swimming Diving
Academic Water Polo
Scholar Team

Time : . Year –

Name(s) on award (individual or relay) **Must be provided.**

1. LAST FIRST **Year in School (9,10,11,12)**
2.
3.
4.

NAME OF SCHOOL

PAYMENT METHOD: Check or Credit Card (Complete the following information):

NAME LAST FIRST

MAILING ADDRESS NUMBER STREET

CITY STATE ZIP

COACHES ONLY

NISCA Member
Yes ☐ **No** ☐
#_____

If **Yes**: Attach a photocopy of your membership card. Cards are available for printing at www.niscaonline.org

Please send this order form, *with your check*, P.O. # will not be accepted, made payable to: **Hasty Awards**
To: Hasty Awards
1015 E Enterprise St., Ottawa, Kansas 66067
E-mail: hasty@niscaonline.org
Fax: 785-242-5342
expect delivery in 6-8 weeks

O R

Charge my: **VISAMASTERCARD**

Account #: __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __

Expiration Date: ____/____ Phone #: _____

Signature:

Revised 05/17