

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

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

High School \_\_\_\_\_

Diver's email \_\_\_\_\_ Grade \_\_\_\_\_

**Verification**

DATE	DIVING MEET	SCORE	PLACE
REF'S SIGNATURE (NUMBER) _____			
MEET MANAGER'S SIGNATURE _____			

Diving Coach \_\_\_\_\_ Phone # \_\_\_\_\_

Diving Coach's email \_\_\_\_\_

By completing this form you agree that NISCA may use the video for educational purposes.

**Include this form with your application, DVD, diving sheet, copy of payment, and the diving results**

[www.niscaonline.org](http://www.niscaonline.org)

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