

# CERTIFICATION CARD REPLACEMENT FORM

#### INSTRUCTIONS

Complete this form if one or more of the following apply:

- · Your diver level certification card was lost.
- Your diver level certification card was damaged.
- · You changed your name (include a copy of legal documentation of name change).
- You are upgrading from any junior level certification.
- You choose to support conservation and would like to replace your existing card with a Project AWARE version of the certification card.

Please provide us with all pertinent information to the best of your knowledge. If you are unable to provide information in either section, please indicate the exact or approximate year of certification and level of Payment (See Section 3 for details.) certification.

The more information you provide, the quicker we can process your request. If you have never received your initial certification card, contact either your PADI Instructor, Dive Center, Resort or PADI to obtain the proper form.

### REQUIRED ITEMS

	Please be sure to enclose one 4.5 cm X 5.7 cm / $1^{3}/_{4}$ " X $2^{1}/_{4}$ " (approx.) photograph to be used on your certification card.
	Certification information, and if available, any additional documentation and/or verification. (See Section 2B for details.)
П	Payment (See Section 3 for details )

PLEASE INDICATE CARD TYPE. If you do not indicate See page 2 for mailing and processing options.	ate a card type, you	will automatically receive a standard certification card.
<ul> <li>Project AWARE Card         (For a minimum donation required for processing, please contact your PADI Office)     </li> </ul>	☐ PADI Stan	dard Card (no additional fee)
PLEASE PRINT CLEARLY – Provide all pertinent information to the	best of your knowled	ge.
SECTION 1 - Information marked with asterisk (*)	is required.	Student Certification #
* Instructor		PADI Instructor No.
Dive Center/Resort		Store No.
* Level of Certification		* Date or approximate year of certification

 Level of Certification \* Diver Name (as printed on original certification card) \* Mailing Address \_\_\_\_\_ \* State/Province \_\_\_\_\_ \* City \_\_\_ \* Country\_\_\_\_\_\_\* Zip/PostalCode\_\_\_\_\_\_ \* Home Phone ( ) Business Phone ( ) Sex: Male Female Email

**SECTION 2 –** Complete Section 2, Part A and B, **ONLY** if you are unable to enclose a copy of your PADI Validation Card. All PADI certification cards issued after 1980 included a PADI Validation Card.

Have you ever replaced your certification card? ☐ Yes ☐ No If yes, what year? \_\_\_\_\_

PART A State and country where certified

PART B Completion of this section is not required however, this additional information will expedite the replacement of your certification card. This information is useful in circumstances where there is difficulty locating your records.

If available, submit a copy of one of the following along with this form (do not send original):

- 1. A signed and dated PADI temporary certification card.
- 2. A signed letter from the certifying instructor/dive center/resort (including date and level of certification, instructor's name and number).
- 3. A copy of a signed PADI wall certificate.
- 4. A copy of your original certification envelope.
- 5. A copy of both sides of your original certification card

Complete Box A or Box B on the next page, whichever applies.

Tape / Attach a 4.5 cm x 5.7 cm  $1\frac{3}{4}$ " x  $2\frac{1}{4}$ " (approx.)

Head and Shoulder Photo

## PRINT NAME ON **BACK OF PHOTO**

Coin Machine Photos OK No Dark Glasses

CERTIFYING INSTRUCTOR'S NAME (Please Print)	INSTRUCTOR NO.	DIVER'S CERTIFICATION LEVEL	
DIVE CENTER/RESORT NAME AND STORE NUMBER	ORIGINAL INSTRUCTOR'S SIGNATURE CERTIFICATION DATE (Must include day/month/year.)		
OX B — To be used by original dive center/resort ONLY  nger with the dive center/resort. Diver Name e diver certification may be verified by either the facility owner, mana ust attest that the original student records are on file with the dive cer	ger or another PADI Instructor	r (of the original store). The verifying pers	
ORIGINAL CERTIFYING INSTRUCTOR'S NAME	INSTRUCTOR NUMBER  DIVER'S CERTIFICATION DATE (Must include day/month/year.)  VERIFYING INDIVIDUAL'S NAME (Please Print)  VERIFYING INDIVIDUAL'S SIGNATURE		
DIVER'S CERTIFICATION LEVEL			
DIVE CENTER/RESORT NAME			
VERIFYING INDIVIDUAL'S TITLE			
CTION 3 — CARD MAILING AND PAYMENT plete Section A or B Below s processed with REGULAR shipping will be mailed via First Class Is processed with PRIORITY shipping will be mailed via priority. If you choose this option, you must include your credit card ber and expiration date, or a separate check sufficient to cover ing costs.  Troject AWARE Card* – (Optional)	☐ Discover Card ☐ Check/Bank Draft No.  *Check/Bank Draft must the application is submitted Card Number	☐ VISA ☐ American Express ☐ JCB  *  be payable in the currency of the PADI (	
You can choose to support conservation and receive a Project AWARE version of your certification card.	Cardholder Name		
Project AWARE Card REGULAR Shipping Fee + donation (Contact your PADI Office for minimum donation)  Project AWARE Card PRIORITY Shipping Fee + donation (Contact your PADI Office for minimum donation)  Standard PADI Card REGULAR Shipping Fee (See price list.)  PRIORITY Shipping Fee (See price list.)	Authorized Signature  MAIL TO: Your PADI Office For mailing information, see	ce current price list or visit padi.com.	
	FOR OFFICE USE ONLY Rec'd Entr'd Shp'd		

PADI is not responsible for forms, copies or photos that are damaged, lost or delayed in the mail.

Should additional information be necessary or a problem arise, you will be notified as soon as possible.