



PO Box 89789  
Tampa, FL 33689  
813-628-6284  
813-628-8253 Fax

NAUI SERVICES GROUP, INC.

CERTIFICATION REPLACEMENT FORM

\*Fill this form out **completely**, including all italicized information. Processing times may be delayed if: your certification was outside of the U.S., more than 20 years ago or if we need to verify your information with the instructor.

\*This form may be faxed to (813) 628-8253.

\*If asking for a name change, include a clear copy of your Photo ID (Passport or Driver's License) and legal documents.

\*For quicker processing time, include copies of any documentation you may have (i.e. - wall certificate, photocopy of your original card, instructor signed training log pages.)

**\* PLEASE CLEARLY PRINT INFORMATION \***

Current Name (or send copy of legal change)

Name at time of certification

Course Level (Scuba, Advanced, Master, etc.)  Instructor NAUI #  Course Date  -   
Month Year

Instructor's Name

Facility Name, if any (to be typed onto card)

PIN #, Registration #, or Social Security #  Date of Birth (MM/DD/YY)

Address at time of certification (city, state, country)

Country you were certified in (If different than above)

Credit Card Information  Discover  Visa  MasterCard  American Express CVV Code (3-4 digit)

Required

Credit Card Number                       Exp.  -   
Month Year

Cardholder Name

Cardholder Signature X

**Order Form (All prices are subject to change without notice)**

Quantity	Description	Price	Extended Amount
	Standard Replacement Card(s)	\$30.00	
	Limited Edition Card(s) (be sure to submit page 2)	<b>\$35.00</b>	
	Additional Card(s)	1/2 price	
	Replacement Certificate	\$20.00	
*Select Shipping Option:			
	Ground	Actual shipping rates will be charged.	
	International Priority Service		
	Next day delivery** and 24-hour processing		
	Second day delivery** and 24-hour processing		
	For Member or CAP participants, use member or CAP # for price level.		
*Actual rates will be charged. Rates are subject to change as carrier rates change. Fuel surcharges are included where applicable. Please call for details. ** PLEASE NOTE: These services may not be available for APO addresses, PO Boxes or areas outside of the United States. Weekends and holidays are not included in delivery time. Please call for details.		<b>TOTAL AMOUNT</b>	

Ship to: Attention: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Country: \_\_\_\_\_ Email: \_\_\_\_\_

I do hereby swear, under penalty of perjury, that I am at least 18 years of age, that I was issued a NAUI certification card as indicated above on or about the date indicated above. I further state that I have lost the card which was issued and, after a thorough search, can find no other information except that provided above to substantiate this affidavit. I hereby release NAUI, its members, directors, and officers from any and all liability that may arise as a result of accepting, as true, this affidavit and issuing a replacement card.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Must be signed by parent or guardian if under 18 years of age)

# NAUI Limited Edition Replacement Certification Card Options

*Please Note: This form must be submitted with a completed Replacement Card Form to obtain a limited edition card. In the event you prefer a traditional replacement card image and style you need to only submit page one of this form.*

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

If you are ordering additional cards and wish to have different images on each, please select preferred image(s) below:

Clownfish       Shark       Turtle

Dolphin       Classic Scuba (for Scuba Diver Level Only)



**Clownfish**



**Shark**



**Turtle**



**Dolphin**



**Classic Scuba**

Your diver certification information as contained in our records will be printed on the reverse of the card as shown:

