

PADI[®] DISCOVER SCUBA DIVING PROGRAM REGISTRATION FORM

NOTE: Keep the yellow copy on file for future reference and send the white copy to PADI within 30 days of program completion.

PADI Instructor Statement: I have conducted all three phases of the Discover Scuba Diving program (Instructor Presentation, Water Skills Introduction and Development, and Initial Open Water Dive) for this participant. NOTE: If the program for this participant was conducted by more than one PADI Instructor, send in this registration form, but do not complete the instructor information area below.

Dive Center/Resort _____ Dive Center No. **S-** _____ Location _____ City/State/Country _____

PARTICIPANT INFORMATION (Please Print)

PADI INSTRUCTOR INFORMATION

1. Name _____ <small>First Middle Initial Last</small>	Program Date _____ <small>MD/Y</small>	Instructor Name (print) _____ <small>First Middle Initial Last</small>	PADI No. _____
Address _____ <small>Phone ()</small>	Birthdate _____ <small>MD/Y</small>	Instructor Signature _____	Date _____ <small>MD/Y</small>
City _____ State _____ Postal/Zip _____ Country _____	Birthdate _____ <small>MD/Y</small>	Instructor Name (print) _____ <small>First Middle Initial Last</small>	PADI No. _____
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