



STAR CREST SKYDIVING AWARDS

OFFICIAL APPLICATION FOR CERTIFICATION OF ABILITY

Please print legibly and fill out completely

Email us pictures & videos of your jump and ceremony and we will post it on our [Facebook](#) and [Instagram](#) page with your award!

Star Crest member #'s Presently Held: _____

We, the undersigned attest that on (Date) ___ / ___ / _____ at ___:___ (AM/PM) Drop Zone: _____

City: _____ State: ___ the above named skydiver did participate in a (Size & Type of Formation):

_____ skydiving Formation entering (position #): _____ for a period of (duration) _____ seconds on their jump No. (jumps to date)

Name as you would like it to appear on your certificate: _____ D.O.B. _____

Address: _____ City: _____ State: _____ Zip: _____ Country: _____

Phone: () _____ E-Mail: _____



Please sign with Star Crest Numbers when possible.

Witnesses of Skydive:

1.	7.
2.	8.
3.	9.
4.	10.
5.	Pilot:
6.	Ground Witnesses:

Each Star Crest Award is \$30.00. New membership awards include: 1 Embroidered Emblem, 1 Decal, 1 Number Tag, 1 Certificate and 1 Membership Card. Earning 2 wards on the same day receive \$5.00 off each additional award. In U.S. Dollars. Some shipping charges may apply to foreign & overseas shipping. Prices subject to change without notice.

Send Applications to:
200 Hollyhill Dr.
Bakersfield, CA 93312
(661) 831-7771

