VIII MADRID OPEN DIVING & HIGH DIVIN AGE GROUP 2024

**MODELO 1**

# CERTIFICATE of their FEDERATION

D._____, as President/Secretary of the territorial Federation of _____

## CERTIFY

That the divers who will participate in VIII MADRID OPEN DIVING & HIGH DIVING AGE GROUP 2024, whose license in the discipline of DIVING has been processed by the club _____ have insurance with the insurance company _____ _____

| NAME | SURNAMES | MALE | FEMALE | YEAR BIRTH |
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SIGNATURE-

_____, _____ de _____ de 2024