

Certified Diver Experience Programs LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT

Please read carefully and fill in all blanks before signing.

that I am aware that skin and souba diving have inherent risks which may result in serious injury or death. I understand that diving with compressed air involves certain inherent risks; including but not limited to decompression sickness, embolism or other hyperbaricair expansion injury that require treatment in a recompression chamber. I further understand that the open water diving trips which are necessary for this experience may be conducted at a site that is remote, either by time or distance or both, from such a recompression chamber. I still choose to proceed with such experience dive(s) in spite of the possible absence of a recompression chamber in proximity to the dive site. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I understand and agree that neither the dive professionals, the facility through which I receive my instruction. I necessary the service of a second professionals and the service of a second profession of the negligence of any party, including the Released Parties, whether passive or active. In consideration of being allowed to participate in the experience dive(s), I hereby personally assume all risks of this experience, whether fore seen or unforeseen, that may befall me while I am a participant in this experience. I further release, exempt and hold harmless said experience and Released Parties from any claim or lawsuit by me, my family, estate, heirs or	I,, he	ereby declare that I am a certified diver, trained in safe diving practices, and affirm
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Facility Name Facility Name International PADI, Inc. nor its affiliate and subsidiary corporations, nor any of their respective employees, officers, agents, contractors or assigns (hereinafter referred to as "Released Parties") may be held liable or responsible in any way for any injury, death or other damages to me, my family, estate, heirs or assigns that may occur as a result of my participation in this experience or as a result of the negligence of any party, including the Released Parties, whether passive or active. In consideration of being allowed to participate in the experience dive(s), I hereby personally assume all risks of this experience, whether fore seen or unforeseen, that may befall me while I am a participant in this experience. I further release, exempt and hold harmless said experience and Released Parties from any claim or lawsuit by me, my family, estate, heirs o assigns, arising out of my enrollment and participation in this experience, including both claims arising during the experience or after I complete the experience. I also understand that skin diving and scuba diving are physically strenuous activities and that I will be exerting myself during this experience, and that if I am injured as a result of heart attack, panic, hyperventilation, drowning or any other cause, that I expressly assume the risk of said injuries and that I will not hold the Released Parties responsible for the same. I understand that past or present medical conditions may be contraindicative to my participation in this experience. I declare that I am in good mental and physical fitness for diving, and that I am not under the influence of alcohol, nor am I under the influence of any drugs that are con traindicatory to diving. If I am taking medication, I declare that I have seen a physician and have approval to dive while under the influence of the mediation/drugs. I will inspect all of my equipment prior to this experience and will notify the Released Parties if any provision of this Agreement of my own f	I understand that diving with compressed air involves certain other hyperbaric/air expansion injury that require treatment in which are necessary for this experience may be conducted a sion chamber. I still choose to proceed with such experience	n inherent risks; including but not limited to decompression sickness, embolism or n a recompression chamber. I further understand that the open water diving trips at a site that is remote, either by time or distance or both, from such a recompres-
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AND INTERNATIONAL PADI, INC., AND ALL RELATED ENTITIES AS DEFINED ABOVE, FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Participant Signature	Date (Day/Month/Year)
Signature of Parent of Guardian (where applicable)	Date (Day/Month/Year)