



Waiver and Release of Liability Assumption of Risk and Indemnity Agreement

THIS FORM IS TO BE USED FOR ALL ENTRY-LEVEL TRAINING

I _____ HEREBY acknowledge that SNORKELING/SCUBA DIVING/RECREATIONAL REBREATHING DIVING IS A POTENTIALLY DANGEROUS ACTIVITY and involves the risk of serious injury and/or death and/or property damage. I FURTHER ACKNOWLEDGE that diving with compressed gas involves certain risks and injuries that can occur which require treatment in a medical facility and/or recompression chamber. I UNDERSTAND that the open water diving trips, which are necessary for training and certification or for other diving activities may be conducted at a site that is remote, either by time or distance or both, from a recompression chamber or medical facilities.

I HEREBY RELEASE, WAIVE, DISCHARGE AND AGREE NOT TO SUE SSI (Scuba Schools International), _____ the dive center / dive resort / dive school, or any of its officers, instructor agents, dive professional agents or employees (the Releasees) FROM ALL LIABILITY TO MYSELF, my personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO MY PERSON OR PROPERTY OR RESULTING IN MY DEATH, NOW AND FOREVER, ARISING OUT OF OR RELATED TO PARTICIPATION AND/OR INSTRUCTION IN SAID COURSE, ACTIVITIES, OR ANY OTHER RELATED DIVING OPERATIONS THAT MAY OCCUR, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, now and forever, arising out of or related to participation and/or instruction in said course, activities, or any other related diving operations, whether foreseen or unforeseen and whether caused by the negligence of the Releasees or otherwise, I HEREBY SEPARATELY agree to INDEMNIFY and SAVE and HOLD HARMLESS the Releasees from any loss, liability, damage or cost that they may incur, now and forever, arising out of or related to participation and/or instruction in said course, activities, or any other related diving operations, whether caused by the negligence of the Releasees or otherwise.

I HEREBY ACKNOWLEDGE THAT INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES and agree that this Waiver and Release of Liability, Assumption of Risk extends to all acts of negligence by Releasees, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as permitted by the laws of the Province or State in which the activities are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I UNDERSTAND and agree that SSI Dive Centers, Diving Schools, Resorts their affiliated Dive Professionals, associated with the program in which I am participating, are licensed to use various SSI Trademarks and to conduct SSI training, but are not agents, employees or franchisees of SSI or its parent, subsidiary and affiliated corporations ("SSI").

I FURTHER UNDERSTAND that the Dive Center, Diving School, Resort and their affiliated Dive Professionals business activities are independent, and are neither owned nor operated by SSI, and that while SSI establishes the standards for SSI diver training programs, it is not responsible for, nor does it have the right to control, the operation of the business activities and the day-to-day conduct of SSI programs and/or supervision of divers by the Dive Center, Diving School, Resort and their affiliated Dive Professionals or their associated staff. I further understand and agree on behalf of myself, my heirs and my estate that in the event of an injury or death during this activity, neither I nor my estate shall seek to hold SSI liable for the actions, inactions or negligence of the Dive Center, Diving School, Resort and their affiliated Dive Professionals and other affiliated personnel associated with the activity.

I HAVE READ this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement, fully understand its terms, understand that I have given up substantial rights by signing it, am aware of its legal consequences, and have signed it freely and voluntarily without any inducement, assurance, or guarantee being made to me and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law. I have had the opportunity to personally discuss with the dive professional the potential dangers incidental to engaging in the course and/or activity of snorkeling/scuba diving/ recreational rebreather diving and related diving operations.

Participant's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

Junior Participant's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

Junior's Parent/Guardian's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

RISK AWARENESS VERIFICATION

To be signed by participant after viewing RISK AWARENESS VIDEO — PART I and prior to any water work: *

Participant's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

Witness _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

To be signed by participant after viewing RISK AWARENESS VIDEO — PART II and prior to open water scuba dives: *

Participant's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

Witness _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

To be signed by participant after viewing RISK AWARENESS VIDEO — PART III and prior to continuing education training dives: *

Participant's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

Witness _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

JUNIOR RISK AWARENESS VERIFICATION

As parent or guardian, I am signing this document on behalf of my minor child and agree to be specifically bound to all the terms and conditions of this Agreement. I have read the agreement, fully understand the terms herein, understand that I have given up substantial rights by signing it, am aware of its legal consequences, and have signed this document freely and voluntarily without any inducement, assurance or guarantee being made to me. I intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law and further agree to indemnify and save and hold harmless Releasees. Additionally, I understand the risks of injury while snorkeling or scuba diving and have had the opportunity to personally discuss the diving activities or instructional program with the dive leader prior to commencement of the minor child's snorkeling or scuba activities.

Mother's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE) ▲ (DD / MM / YY)

Father's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE) ▲ (DD / MM / YY)

Guardian's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE) ▲ (DD / MM / YY)

To be signed by participant after viewing RISK AWARENESS VIDEO — PART IV for Children and prior to any water work: *

Junior Participant's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

Junior's Parent/Guardian's Name _____ **Date** _____
 ▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

*** NOTE: This Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement is to be signed by the minor child as a participant, as well as by one or both parents or the guardian.**



Waiver and Release of Liability Assumption of Risk and Indemnity Agreement

THIS FORM IS TO BE USED FOR ALL DIVING ACTIVITIES **OTHER THAN ENTRY-LEVEL TRAINING**

I _____ HEREBY acknowledge that SNORKELING/SCUBA DIVING/RECREATIONAL REBREATHING DIVING IS A POTENTIALLY DANGEROUS
▲ PARTICIPANT'S NAME
ACTIVITY and involves the risk of serious injury and/or death and/or property damage. I FURTHER ACKNOWLEDGE that diving with compressed gas involves certain risks and injuries that can occur which require treatment in a medical facility and/or recompression chamber. I UNDERSTAND that the open water diving trips, which are necessary for training and certification or for other diving activities may be conducted at a site that is remote, either by time or distance or both, from a recompression chamber or medical facilities.

I HEREBY RELEASE, WAIVE, DISCHARGE AND AGREE NOT TO SUE SSI (Scuba Schools International), _____ the dive center / dive resort
▲ DIVE CENTER/DIVE RESORT/DIVE SCHOOL
/ dive school, or any of its officers, instructor agents, dive professional agents or employees (the Releasees) FROM ALL LIABILITY TO MYSELF, my personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO MY PERSON OR PROPERTY OR RESULTING IN MY DEATH, NOW AND FOREVER, ARISING OUT OF OR RELATED TO PARTICIPATION AND/OR INSTRUCTION IN SAID COURSE, ACTIVITIES, OR ANY OTHER RELATED DIVING OPERATIONS THAT MAY OCCUR, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, now and forever, arising out of or related to participation and/or instruction in said course, activities, or any other related diving operations, whether foreseen or unforeseen and whether caused by the negligence of the Releasees or otherwise, I HEREBY SEPARATELY agree to INDEMNIFY and SAVE and HOLD HARMLESS the Releasees from any loss, liability, damage or cost that they may incur, now and forever, arising out of or related to participation and/or instruction in said course, activities, or any other related diving operations, whether caused by the negligence of the Releasees or otherwise.

I HEREBY ACKNOWLEDGE THAT INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES and agree that this Waiver and Release of Liability, Assumption of Risk extends to all acts of negligence by Releasees, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as permitted by the laws of the Province or State in which the activities are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I UNDERSTAND and agree that SSI Dive Centers, Diving Schools, Resorts their affiliated Dive Professionals, associated with the program in which I am participating, are licensed to use various SSI Trademarks and to conduct SSI training, but are not agents, employees or franchisees of SSI or its parent, subsidiary and affiliated corporations ("SSI").

I FURTHER UNDERSTAND that the Dive Center, Diving School, Resort and their affiliated Dive Professionals business activities are independent, and are neither owned nor operated by SSI, and that while SSI establishes the standards for SSI diver training programs, it is not responsible for, nor does it have the right to control, the operation of the business activities and the day-to-day conduct of SSI programs and/or supervision of divers by the Dive Center, Diving School, Resort and their affiliated Dive Professionals or their associated staff. I further understand and agree on behalf of myself, my heirs and my estate that in the event of an injury or death during this activity, neither I nor my estate shall seek to hold SSI liable for the actions, inactions or negligence of the Dive Center, Diving School, Resort and their affiliated Dive Professionals and other affiliated personnel associated with the activity.

I HAVE READ this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement, fully understand its terms, understand that I have given up substantial rights by signing it, am aware of its legal consequences, and have signed it freely and voluntarily without any inducement, assurance, or guarantee being made to me and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law. I have had the opportunity to personally discuss with the dive professional the potential dangers incidental to engaging in the course and/or activity of snorkeling/scuba diving/ recreational rebreather diving and related diving operations.

Participant's Name _____ **Date** _____
▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

RISK AWARENESS 3

I HAVE READ this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement, fully understand its terms, understand that I have given up substantial rights by signing it, am aware of its legal consequences, and have signed it freely and voluntarily without any inducement, assurance, or guarantee being made to me and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law. I have had the opportunity to personally discuss with the dive professional the potential dangers incidental to engaging in the course and/or activity of snorkeling/scuba diving/ recreational rebreather diving and related diving operations.

Participant's Name _____ **Date** _____
▲ Name (PLEASE PRINT) ▲ (SIGNATURE REQUIRED) ▲ (DD / MM / YY)

JUNIOR RISK AWARENESS VERIFICATION

As parent or guardian, I am signing this document on behalf of my minor child and agree to be specifically bound to all the terms and conditions of this Agreement. I have read the agreement, fully understand the terms herein, understand that I have given up substantial rights by signing it, am aware of its legal consequences, and have signed this document freely and voluntarily without any inducement, assurance or guarantee being made to me. I intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law and further agree to indemnify and save and hold harmless Releasees. Additionally, I understand the risks of injury while snorkeling or scuba diving and have had the opportunity to personally discuss the diving activities or instructional program with the dive leader prior to commencement of the minor child's snorkeling or scuba activities.

Mother's Name _____ **Date** _____
▲ Name (PLEASE PRINT) ▲ (SIGNATURE) ▲ (DD / MM / YY)

Father's Name _____ **Date** _____
▲ Name (PLEASE PRINT) ▲ (SIGNATURE) ▲ (DD / MM / YY)

Guardian's Name _____ **Date** _____
▲ Name (PLEASE PRINT) ▲ (SIGNATURE) ▲ (DD / MM / YY)

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