

## **International Training**

## GENERAL LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK

**Directions:** Please read carefully, fill in all blanks and initial each paragraph before signing at bottom.

## For Unguided and Unsupervised Boat Dives for Certified Divers

I,, hereby affirm that I have been	en advised and thoroughly informed of the inherent hazards of scuba diving
activities and participation in a unguided unsupervised tour as a certifie	d diver.
semi-closed circuit or closed circuit rebreathers involves certain in inert gas narcosis, hypoxia, hypercapnia, marine life injuries or ot treatment in a recompression chamber or medical facility. I furthe	riched air (Nitrox), and trimix supplied by standard open circuit scuba or with inherent risks including decompression sickness, embolism, oxygen toxicity, her barotrauma or hyperbaric injuries. Such injuries can occur that require er understand that dive activities can be at remote sites, and isolated by time
	ility. I still choose to proceed with such dives in spite of the absence of a
recompression chamber in proximity to the dive site.	
I understand and agree that neither the captain and crew	, nor the
, nor any of the respective employees, officers, agents or assigns of	, (hereinafter referred to
that may occur as a result of my participation in this diving activi whether passive or active.	, nor the, (hereinafter referred to y for any injury, death, or other damages to me or my family, heirs, or assigns ty or as a result of the negligence of any party, including the Released Parties,
In consideration of being allowed to participate in this activity I h	ereby personally assume all risks in connection with said trip, for any harm,
	ant including all risks connected therewith, whether foreseen or unforeseen.
my behalf, my family, estate, heirs or assigns, arising directly or in during this activity even if such claims may be groundless, false o	
as a result of heart attack, panic, hyperventilation, oxygen toxicity injuries and that I will not hold the above listed individuals or co	d that I will be exerting myself during this diving trip and that if I am injured in interest in the risk of said in interest in i
harmless said Released Parties for any such injuries incurred by n	
I understand that these activities may place me deeper than I am	
· •	quipment and that I am responsible for its operating condition and
maintenance.	
	quipment and that I am responsible for reviewing its proper function and
	n this liability release, or that I have acquired the written consent of my parent
or guardian I further state that I am already a qualified and certified scuba div	on from the following twining against
I turther state that I am already a quantied and certified scuba div	trom the following training agencies:,
and that I hold training to the level of	. I am aware of the required certification level and/or experience
necessary and recommended to enroll in this diving activity and i	stipulate that I meet those requirements for prior certification or equivalent
	been diving for years for a total of dives to a maximum depth
of ft.	vil id at a state of the control of the
I understand that the terms herein are contractual and not a mere	recital, and that I have signed this document of my own free act. Further that
	provisions of this agreement, for any reason, is held by a court of competent
	validity, illegality or unenforceability shall not affect any other provision hereof,
and this agreement shall be construed as it such invalid, illegal or	unenforceable provision or provisions had never been contained herein.
IT IS THE INTENTION OF	BY THIS INSTRUMENT TO EXEMPT AND RELEASE THE CAPTAIN/
CREW, THE VE	SSEL THE BUSINESS
AND ALL OTHER RELATED	D ENTITIES AND RELEASED PARTIES AS DEFINED ABOVE, FROM
	NAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH HOWEVER
	UDING, BUT NOT LIMITED TO, THE NEGLIGENCE OF THE RELEASED
	MED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND
EXPRESS ASSUMPTION OF RISK BY READING IT BEFORE SIGNIN	IG II ON BEHALF OF MISELF AND MI HEIRS.
No alterations, changes, omissions or revisions may be made.	
Signature of Student/Participant (where applicable)	Data: / /
signature of student/Participant (where applicable)	Date://
	Day / Month / Year
Signatures of Parents or Guardians	Date: / /
orginatares of Farefits of Gadinians	Date:/
	·
Witness Signature	Date:/
<del>-</del>	Day / Month / Year