SCUBA FUN Explore, Conserve & Rebuild the ocean with us...

DIVER ACTIVITIES

LIABILITY RELEASE & ASSUMPTION OF RISK AGREEMENT PLEASE READ CAREFULLY AND FILL IN ALL THE BLANKS BEFORE SIGNING

٠		eclare that I am a certified scuba diver, trained in safe diving	
	practices, and I am aware of the inherent hazards of freed	0	
٠	I understand and agree that neither ScubaFun nor any of their respective employees, agents or assign		
(hereinafter referred to as "released") may be held liable or responsible in any way for any injury, death			
	to me or my family, including the released parties; whether passive or active.		
٠			
can occur that require treatment in a recompression chamber. I further understa			
		om such a recompression chamber. I still choose toproceed	
	with such activity in spite of the possible absence of a recompression chamber in proximity to the dive site.		
•	I declare that I am in good mental and physical fitness for diving. And that I am not under the influence of alcohol, or any drugs that are contradicatory 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 medication/drugs.		
•	• I understand that freediving and scuba diving are physically strenuous activities and that I will be excerpting myself		
	during this activity, and that if I am injured as a result of a risk of said injuries, and that I will not hold the released pa	heart attack, panic, hyperventilation, etc, that I assume the rties responsible for the same.	
•	• I will inspect all of my equipment prior to the activity. I will not hold the released parties responsible for my failureto		
	inspect my equipment prior to diving.		
•	• In consideration of being allowed to do the activity, I hereby personally assume all risks in connection with the		
	diver(s) from any harm, injury or damage that may befall me while I am a participant, including all risks connected		
	therewith.		
٠	• I further declare that I am of lawful age and legally competent to sign this liability release, or that I have acquired the		
	written consent of my parent or guardian.		
	 I understand the terms and I have signed this document of my own free act. 		
•	• It is the intention of the signee by this instrument to exempt and release the ScubaFun 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 and my heirs of the contents of this non-		
	agency disclosure and acknowledge agreement, and liability release and assumption of risk by reading it before		
	signing below on behalf of myself and my heirs.		
Pı	Printed Name: Las	t Dive (month/year):	
C	Certification Agency: Cer	tification Level:	
0.			
Тс	Total Number of Dives:Cer	tification Number:	
Emergency Contact Name and Number:			
Pa	Participants Signature Da	te:	
		····	
	Signature of Parent / Guardian Dat		



SCUBAFUN PERSONAL SPORT COACHING SERVICES LICENSE No. 1409012



Landline: 04-2405389 Mobile: 0502755190 Email: Rjscubafunae@gmail.com