

### Release of Liability/Assumption of Risk/Non-agency **Acknowledgement Form**

## SELF-RELIANT DIVER TRAINING

Please read carefully and fill in all blanks before signing.

Non-Agency Disclosure	and Acknowledg	ment Agreement	
I understand and agree that PADI Members ("Members or any individual PADI Instructors and Diversers associated warious PADI Trademarks and to conduct PADI training, but its parent, subsidiary and affiliated corporations ("PADI"), and are neither owned nor operated by PADI, and that whis not responsible for, nor does it have the right to controconduct of PADI programs and supervision of divers by the behalf of myself, my heirs and my estate that in the ever seek to hold PADI liable for the actions, inactions or negor the instructors and diversers associated with the actions.	ciated with the program but are not agents, emp I further understand th hile PADI establishes the ol, the operation of the Mane Members or their asset of an injury or death of the operation of the Mane Members or their asset of an injury or death of the operation of an injury or death of the operation of an injury or death of the operation of t	in which I am participating, a bloyees or franchisees of PAD at Member business activities are standards for PADI diver tradembers' business activities a sociated staff. I further unders during this activity, neither I resolves activity, neither I resolves.	are licensed to use of Americas, Inc, or a sare independent, aining programs, it and the day-to-day at and and agree on nor my estate shall
Liability Release and	Assumption of R	isk Agreement	
I,			
I understand that diving with compressed air involves ce embolism or other hyperbaric/air expansion injury that req open water diving trips which are necessary for training a time or distance or both, from such a recompression cham possible absence of a recompression chamber in proximi will not have a buddy to assist me should any of these or	uire treatment in a recor and for certification may nber. I still choose to pro ity to the dive site. I furth other issues occur.	mpression chamber. I further use to be conducted at a site that is beced with such instructional of the understand that by choos	inderstand that the s remote, either by dives in spite of the ing to dive alone, I
I understand and agree that neither my instructor(s), which I receive my instruction, store/reso subsidiary corporations, nor any of their respective emplo "Released Parties"), may be held liable or responsible in a heirs or assigns that may occur as a result of my participal including the Released Parties, whether passive or active	yees, officers, agents, o any way for any injury, d ation in this diving progr	contractors or assigns (herein leath or other damages to me	after referred to as , my family, estate,
In consideration of being allowed to participate in this cour or unforeseen, that may befall me while I am a participa water and/or open water activities.			

I further release, exempt and hold harmless said course and Released Parties from any claim or lawsuit by me, my family, estate, heirs or assigns, arising out of my enrollment and participation in this course including both claims arising during the course or after I receive my certification.

I also understand that skin diving and scuba diving are physically strenuous activities and that I will be exerting myself during this course, 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 again affirm that by choosing to dive alone, I will not have a buddy to assist me should any of these or other issues occur.

I further state 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.



### Release of Liability/Assumption of Risk/Non-agency Acknowledgement Form

# **SELF-RELIANT DIVER TRAINING**

I understand the terms herein are contractual and not a mere recital, and that I have signed this Agreement of my own free act and with the knowledge that I hereby agree to waive my legal rights. I further agree that if any provision of this Agreement is found to be unenforceable or invalid, that provision shall be severed from this Agreement. The remainder of this Agreement will then be construed as though the unenforceable provision had never been contained herein.

I understand and agree that I am not only giving up my right to sue the Released Parties but also any rights my heirs, assigns, or beneficiaries may have to sue the Released Parties resulting from my death. I further represent I have the authority to do so and that my heirs, assigns, or beneficiaries will be estopped from claiming otherwise because of my representations to the Released Parties.

l,	participant name		, BY THIS INSTRUM	ENT AGREE TO EXE	MPT AND RELEASE MY
INSTRUCTORS,	instru	uctor(s)		THE FACILITY THRO	OUGH WHICH I RECEIVE
MY INSTRUCTION,	store	e/resort		, and padi am	MERICAS, INC., AND ALI
PROPERTY DAMAG		, FROM ALL LIABILITY O ATH HOWEVER CAUSED, OR ACTIVE.			
FULLY INFORMED	MYSELF AND MY HEIR IABILITY RELEASE ANI	MY HEIRS OF THE RISKS IS OF THE CONTENTS OF D ASSUMPTION OF RISK A	THIS NON-AGENC	Y DISCLOSURE AN	D ACKNOWLDGEMENT
		Participant Signature			Date (Day/Month/Year)
		Parental Signature			Date (Dav/Month/Year)