



STANDARD SAFE DIVING PRACTICES STATEMENT OF UNDERSTANDING

STATEMENT OF RISKS AND LIABILITY – SCUBA DIVING TRIPS

This is a statement in which you are informed of the risks of hazards occurring whilst traveling to and participating in scuba dives either as a certified diver or as a student under the control and supervision of a certified scuba instructor. This statement covers recreational scuba dive trips and scuba dive trips carried out as part of a scuba diving class. This statement also sets out the circumstances in which you participate in the scuba diving trip at your own risk. Your signature on this statement is required as proof that you have received and read this statement. It is important that you read the contents of this statement before signing it. If you do not understand anything contained in this statement then please discuss it with your instructor/ dive professional. If you are a minor, this form must also be signed by a parent or guardian.

WARNING Skin and scuba diving have inherent risks which may result in serious injury or death.

Diving with compressed air involves certain inherent risks; decompression sickness, embolism or other hyperbaric injury can occur that require treatment in a recompression chamber. Open water scuba diving trips may be conducted at a site that is remote, either by time or distance, from such a recompression chamber. In addition, during boat travel to and from dive sites, you should follow all safety instructions from the captain/crew members and take care while getting on or off the boat and while on board to avoid slipping, falling or drowning.

EXCLUSION OF LIABILITY I understand and agree that the staff at Dive Antilles nor the are or the owner of the vessel, touch of glass nor PADI International Ltd., nor PADI Americas Inc., nor their affiliate or subsidiary companies, nor any of their respective employees, officers, agents or assigns (hereinafter referred to as "Released Parties") accept any responsibility for any death, injury or other loss suffered or caused by me or resulting from my own conduct or any matter or condition under my control which amounts to my own contributory negligence, during or as a consequence of my participation in this scuba diving / snorkeling trip. In the absence of any negligence or breach of duty by the crew or owner of the vessel, PADI International Ltd., PADI Americas, Inc., and all released entities and released parties as defined above, my participation in this scuba diving trip is entirely at my own risk. I certify I am medically fit to partake in this activity.

PARTICIPANT NAME (Please Print)

Participant's Signature

Date (Day/Month/Year)

Signature of Parent of Guardian (where applicable)

Date (Day/Month/Year)

This is a statement in which you are informed of the established safe diving practices for skin and scuba diving. These practices have been compiled for your review and acknowledgement and are intended to increase your comfort and safety in diving. Your signature on this statement is required as proof that you are aware of these safe diving practices. Read and discuss the statement prior to signing it. If you are a minor, this form must also be signed by a parent or guardian.

I, _____, understand that as a diver I should:

- Maintain good mental and physical fitness for diving. Avoid being under the influence of alcohol or dangerous drugs when diving. Keep proficient in diving skills, striving to increase them through continuing education and reviewing them in controlled conditions after a period of diving inactivity, and refer to my course materials to stay current and refresh myself on important information.
- Be familiar with my dive sites. If not, obtain a formal diving orientation from a knowledgeable, local source. If diving conditions are worse than those in which I am experienced, postpone diving or select an alternate site with better conditions. Engage only in diving activities consistent with my training and experience. Do not engage in cave or technical diving unless specifically trained to do so.
- Use complete, well-maintained, reliable equipment with which I am familiar; and inspect it for correct fit and function prior to each dive. Have a buoyancy control device, low-pressure buoyancy control inflation system, submersible pressure gauge and alternate air source and dive planning/monitoring device (dive computer, RDP/dive tables—whichever you are trained to use) when scuba diving. Deny use of my equipment to uncertified divers.
- Listen carefully to dive briefings and directions and respect the advice of those supervising my diving activities. Recognize that additional training is recommended for participation in specialty diving activities, in other geographic areas and after periods of inactivity that exceed six months.
- Adhere to the buddy system throughout every dive. Plan dives – including communications, procedures for reuniting in case of separation and emergency procedures – with my buddy.
- Be proficient in dive planning (dive computer or dive table use). Make all dives no decompression dives and allow a margin of safety. Have a means to monitor depth and time underwater. Limit maximum depth to my level of training and experience. Ascend at a rate of not more than 18 meters/ 60 feet per minute. Be a SAFE diver – Slowly Ascend From Every dive. Make a safety stop as an added precaution, usually at 5 meters/15 feet for three minutes or longer.
- Maintain proper buoyancy. Adjust weighting at the surface for neutral buoyancy with no air in my buoyancy control device. Maintain neutral buoyancy while underwater. Be buoyant for surface swimming and resting. Have weights clear for easy removal, and establish buoyancy when in distress while diving.
- Breathe properly for diving. Never breath-hold or skip-breathe when breathing compressed air, and avoid excessive hyperventilation when breath-hold diving. Avoid overexertion while in and underwater and dive within my limitations.
- Use a boat, float or other surface support station, whenever feasible.
- Know and obey local dive laws and regulations, including fish and game and dive flag laws.
- I have read the above statements and have had any questions answered to my satisfaction. I understand the importance and purposes of these established practices. I recognize they are for my own safety and well-being, and that failure to adhere to them can place me in jeopardy when diving.

Participant's Signature

Date (Day/Month/Year)

Signature of Parent or Guardian (where applicable)

Date (Day/Month/Year)



Guest Information

Full Name _____
D.O.B ____/____/_____
Address _____
City _____ State _____ Zip _____
Country _____ Cell Number _____
Email _____
Emergency Contact Name _____
Emergency Contact Cell _____

Rental Equipment

BCD Size _____ Wetsuit size _____ Mask YES/NO
Fin Size _____ Weights _____ Regulator YES/NO

Certification Number

Agency _____ Level of Cert _____
(PADI, NAUI, SSI, ect) (OPEN WATER, ADVANCE, etc)
Certification Number _____
Year certified _____
Number of dives _____
last dive ____/____/_____
Dive Insurance _____
Policy Number _____

Cruise Line Information

Cruise Name _____ RoomNumber _____
Arrival Date ____/____/____. Arrival Time _____ Departure Time _____