

PERSONAL INFORMATION

FIRST NAME _____ MI _____ LAST NAME _____

HOME ADDRESS _____

CITY _____ ST _____ ZIP _____

COUNTRY _____ DATE OF BIRTH _____ AGE _____

(_____) _____

HOME AREA CODE AND TELEPHONE _____

EMAIL ADDRESS _____

These Waiver and Release forms cover my diving activities aboard the Pure Pleasure, between _____/2010 and _____/2010.

DIVEMASTER REQUEST/DECLINE

(Check and Initial one box only)

I **REQUEST** that a PADI Divemaster, Assistant Instructor or Instructor accompany me on the first dive of today's dive trip.

I **DECLINE** the assistance of a PADI Divemaster, Assistant Instructor or Instructor on today's dive trip. I affirm that I have been diving **within the past 2 years**, and that I have both prior **open ocean diving** and prior **boat diving** experience.

SIGNATURE OF DIVER _____ DATE _____

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

LIABILITY RELEASE FOR SUPERVISION OF CERTIFIED DIVER/SNORKELER

THIS IS A RELEASE OF YOUR RIGHTS TO SUE INFINITE BLUE LLC, D.B.A. SCUBA 7, ST. MARKS CHARTERS AND/OR ITS EMPLOYEES, CAPTAINS, DIVEMASTERS, OR AGENTS AND ASSIGNS FOR PERSONAL INJURIES OR WRONGFUL DEATH THAT MAY OCCUR DURING THE FORTHCOMING DIVE ACTIVITY AS A RESULT OF THE INHERENT RISKS ASSOCIATED WITH SCUBA DIVING/SNORKELING OR AS A RESULT OF NEGLIGENCE.

Place your initials next to each of the following sections.

- _____ 1. I acknowledge that I am a certified diver trained in safe diving practices.
- _____ 2. I am aware of the risks inherent in this sport and accept these risks.
- _____ 3. I affirm that I am in good mental and physical fitness for diving, and that I am not under the influence of alcohol, nor am I under the influence of drugs that are contradictory to diving. If I am taking medication, I affirm that I have seen a physician and have approval to dive while under the influence of the medication/drugs.
- _____ 4. I am aware of the dangers of breath holding while scuba diving, and will not hold Infinite Blue, LLC nor St Marks Charters and related entities (such as employees, instructors, certified assistants, boat operators, or diver training agencies) responsible if I am injured doing so.
- _____ 5. I am aware that I will be diving with a buddy, and it will be our responsibility to plan a dive allowing for our diving limitations and the prevailing water conditions. I will not hold the above listed businesses and individuals responsible for my failure to safely plan my dive.

_____ 6. I will inspect all of my equipment prior to the activity and will notify the above listed businesses and/or individuals if any of my equipment is not working properly. I will not hold the above listed businesses nor individuals responsible for my failure to inspect my equipment prior to diving.

_____ 7. I acknowledge that I am physically fit to scuba dive/snorkel, and I will not hold the above listed businesses nor individuals responsible if I am injured as a result of heart, lung, ear, or circulatory problems or other illnesses that occur while diving and/or snorkeling.

_____ 8. I understand that even though I follow all of the appropriate dive practices, there is still some risk of my sustaining decompression sickness, embolism, or other hyperbaric injuries, and I expressly assume the risk of said injuries.

_____ 9. I also expressly assume risk and accept the responsibility to plan my dive and dive my plan.

_____ 10. I also understand that scuba diving/snorkeling is a physically strenuous activity and that I will be exerting myself during this diving excursion, and if I am injured as a result of heart attack, panic, hyperventilation, etc., that I expressly assume the risk of said injuries and that I will not hold the above listed businesses nor individuals responsible for the same.

_____ 11. I also understand that on this open water diving trip, I will be at a remote site and that there will not be immediate medical care or hyperbaric care available to me, and I expressly assume the risk of diving in such a remote spot.

_____ 12. IT IS THE INTENTION OF (PARTICIPANT) _____ BY THIS INSTRUMENT TO EXEMPT AND RELEASE INFINITE BLUE LLC DBA SCUBA 7 AND ST MARK CHARTERS AND ALL RELATED ENTITIES AS DEFINED ABOVE FROM ALL LIABILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE, AND WRONGFUL DEATH CAUSED BY NEGLIGENCE.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS INFORMATION AND RELEASE BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

SIGNATURE OF DIVER _____

DATE _____

SIGNATURE OF PARENT OR GUARDIAN _____

DATE _____

