

101 – 2270 Cliffe Avenue Courtenay, BC V9N 2L4 (250)338-6829 Fax 338-2473 travel@scubashark.com

INTERNATIONAL DIVE TRAVEL VOLUNTARY RELEASE, WAIVER and ASSUMPTION OF RISK

Please read carefully. Initial at each paragraph acknowledging that you understand, agree to and will comply with the mandates set forth within each paragraph. Be sure to fill in all blanks before signing. Signing this contract confirms your understanding of and compliance to every aspect of this contract in part and in whole – without any exception. This contract is two pages and may have addendum attached.

I hereby affirm that I am a certified SCUBA diver or a student diver under the control and supervision of a certified and insured SCUBA instructor, and that I thoroughly understand the hazards of SCUBA diving, or will be participating as a non diver. I further acknowledge and understand the hazards associated with travel which I will experience on this trip including, but not limited to Airplane. Boat and Road Vehicle, I understand that these hazards include but are not limited to, air expansion injuries, drowning, decompression sickness, hyperoxia, hypoxia, hypercapnia, slipping or falling while on board, being cut or struck by the boat while in the water, injuries occurring while boarding or disembarking vessels, as well as associated international travel by boat, airplane and/or roadway. By signing this release, I certify that I am fully aware of and expressly assume these and all other risks involved in making such an outing and dives, whether conducted as a recreational (sport or technical) dive, exploratory, commercial or training dive as well as the necessary travel required to reach each destination. I understand and agree that Pacific Pro Dive Ltd, the facility through which I book my travel, the vessel(s), her crew or owner(s) nor the owners, officers, employees, instructors, agents or assigns of the above listed individuals and/or entities (hereinafter "Released Parties) may be held liable or responsible in any way for any occurrences on this outing which may result in personal injury, property damage or loss, wrongful death or other damage or loss to me or my family, heirs or assigns that may occur as a result of my participation on this trip and/or SCUBA dive(s) or as a result of the negligence of any party, including Released Parties, whether passive or active. I further state that I am of lawful age and legally competent to sign this liability release, or have obtained the written consent of my parent or quardian. I agree to follow and dive within the prescribed parameters of the charter, expedition or training program which includes diving within the limits of my completed certification and experience AND adhering to any additional restrictions imposed to me by the Team Leader, Charter Divernasters and/or Boat Crew. I understand and accept that failure to do so will result in the immediate termination of any further activities and privileges associated with charter, expedition, training program for the duration of the trip, expedition, training program and any future travel, expeditions and training programs. I understand that it may also result in my premature debarkation at any unscheduled port and that I accept that I alone will be responsible for any additional subsequent travel costs and arrangements. Use of or possession of any illicit drugs is strictly prohibited (except prescription mediations cleared by a physician familiar with diving physiology) and will likely result in arrest, imprisonment, injury or death should a diving activity occur. If I have a history of use with drugs, barbiturates or other forms of narcotics, I agree to bring the issue to the attention of the group leader in advance of engaging in this International Travel. I understand and accept that failure to do so will result in the immediate termination of any further diving activities and privileges associated with charter, expedition, training program for the duration of the charter, expedition, training program and any future charters, expeditions and training programs. I understand that it may also result in my premature debarkation at any unscheduled port and that I accept that I alone will be responsible for any additional subsequent travel costs and arrangements.

















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| I understand and agree the diving equipment, personal belong program. Weather, sea state and damage of the above listed items. Released Parties will cover damage. | gings or cameras wother forces of nate Understand that n | while involved with this charte ure are always inherent factor neither the charter vessels in | ors and can lead to the loss or |
|---|---|---|----------------------------------|
| I understand that a valid understand that passports which a should be renewed in advance of for this or any other reason that the resulting damage or losses. | are due to expire w travel otherwise I r | vithin 6 months of my planne may be denied entry. Should | I be denied entry into a country |
| Divers Alert Network Pred Dive Travel Programs. I understar medical and/or evacuation costs w | nd and agree that t | he Released Parties are not | |
| I have been made aware any reason. Name and itinerary chitinerary changes, name changes a suitable Travel Cancellation Insucard. | nanges are not per or trip cancellation | mitted and forfeiture of all fe . For this reason it is highly i | recommended that you purchase |
| I, | ES AND/OR INDIV PERTY DAMAGE, I TO, PRODUCT LI | IDUALS FROM ALL LIABILI LOSSES OR WRONGFUL [| DEATH HOWEVER CAUSED |
| I ACKNOWLEDGE THAT I HAVE READ THE FOREGOING PARAGRAPHS AND ALL ITEMS AND ARTICLES WITHIN THIS CONTRACT, FULLY UNDERSTAND THE POTENTIAL DANGERS INCIDENTAL TO ENGAGING IN THIS EXPEDITION, BOAT TRAVEL AND/OR SCUBA DIVE(S), AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING THIS INSTRUCMENT, AND WILL PRECLUDE ME FROM RECOVERING MONETARY DAMAGES FROM THE ABOVE LISTED ENTITIES AND/OR INDIVIDUALS, WHETHER SPECIFICALLY NAMED OR NOT, FROM PERSONAL INJURY, PROPERTY DAMAGE, LOSSES OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR PRODUCT LIABILITY. | | | |
| print name | | mailing address | |
| city | prov/state | p code | country |
| telephone | email | certification level | certifying agency |
| signature | | date | |
| | | | |





Emergency Contact Name







Emergency Contact Phone



