



Professional Scuba Association International

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PERPETUATUAL RELEASE, WAIVER OF LIABILITY, NEGLIGENCE, ASSUMPTION OF RISK AGREEMENT, AND HOLD HARMLESS AGREEMENT

(INITIAL AT THE LEFT OF EACH SECTION AFTER YOU HAVE READ IT)

_____ I, the undersigned, (print name) _____, being over the age of EIGHTEEN (18) years, HEREBY AGREE AS FOLLOWS:

_____ 1. Knowingly, freely, and voluntarily, for myself, my heirs, personal representative and assigns, WAIVE any right or cause of action of any kind whatsoever, arising as a result of my being on the premises or boat or my participation in any form of SCUBA diving, weather on OPEN CIRCUIT, CLOSED CIRCUIT, SEMI-CLOSED CIRCUIT, while breathing AIR, NITROX, TRIMIX, or any other COMPRESSED GASSES, which any liability may accrue to the PROFESSIONAL SCUBA ASSOCIATION INTERNATIONAL, (hereby referred to as PSAI), their agents, servants, officers, instructors, or employees.

_____ 2. Assume all risk of injury to myself, including but not limited to, death by drowning or other accidents such as air embolism, the bends, and any other related diving injuries, and to my property, while participating in swimming, SCUBA diving, or any activities incidental thereto.

_____ 3. I am aware that SCUBA diving is INHERENTLY DANGEROUS and I ASSUME ALL RISKS related to such an activity. I further understand that such activities may take place at remote areas and a recompression chamber, which may be used to treat any injuries I may receive, may not be close by. Being aware of such risk, I still choose to participate in SCUBA diving.

_____ 4. For myself and my heirs, personal representatives, or assigns, from the date of this RELEASE and WAIVER AGREEMENT and forever hereafter, hold the said PROFESSIONAL SCUBA ASSOCIATION INTERNATIONAL, their agents, servants, officers, instructors, or employees, harmless and blameless for any injury to myself, including death, occasioned by participation in SCUBA diving activities, whether resulting by or through NEGLIGENCE of the PROFESSIONAL SCUBA ASSOCIATION INTERNATIONAL, their agents, servants, officers, instructors, or employees. Should I, my heirs, personal representatives, or assigns, institute any action against the PROFESSIONAL SCUBA ASSOCIATION INTERNATIONAL, their agents, servants, officers, instructors, or employees, arising out of injury to myself or property, as a result of SCUBA diving, then and in that event, I for myself and my heirs, legal representatives and assigns, HEREBY AGREE to pay all costs of such action, including attorneys fees incurred by them.

SIGNED under seal this: _____ day of _____, _____
(DAY) (MONTH) (YEAR)

Participant's Signature: _____

Address (print): _____

City: _____ State: _____ Zip/Postal Code: _____ Country: _____

Phone Number: _____ Certification Number: _____ Agency: _____

Date of Certification: _____ Level of Certification: _____
(Student, Open Water, Advanced Open Water, Technical, etc.)

WITNESS TO SIGNATURE:

Witness to Signature: (Please sign Name) _____

Address of Witness: _____

City: _____ State: _____ Zip/Postal Code: _____ Country: _____

Phone Number: _____

IN CASE OF EMERGENCY CONTACT:

Name: _____

Home Phone: _____ Business Phone: _____

PSAI Course: _____ PSAI INSTRUCTOR: _____