



United Dive Club

Diver Liability Release

(Complete one form per diver)

Name: _____ Age: _____ Sex: _____ DOB: _____

Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____

Cell Phone: _____ E-mail: _____

Are you a certified diver? _____ If no, are you in the process of completing a scuba course?*

*If you are not a certified diver, all diving must be done with a certified dive instructor.

Certification agency, certification number & level of certification: _____

Approx. number of dives to date: _____ Date of last dive: _____

Do you carry DAN or other dive insurance? _____

If yes, name of insurance carrier & insurance ID # _____

Emergency contact name & phone #: _____

I, _____, HEREBY DECLARE THAT I AM A CERTIFIED SCUBA DIVER or in the care of a certified dive instructor, TRAINED IN SAFE DIVING PRACTICES, AND AM AWARE OF THE INHERENT HAZARDS OF SKIN AND SCUBA DIVING. I understand and agree that neither the United Dive Club, its divemasters or instructors nor the organizers or promoters of this event, nor its affiliate or subsidiary corporations, nor any of their respective employees, officers, agents or assigns (hereinafter referred to as "Released Parties"), may be held liable or responsible in any way for any injury, death or other damages to me or my family, heirs, or assigns that may occur as a result of my participation in this activity, or as a result of product liability or the negligence of any party, including the Released Parties, whether passive or active. I understand that diving with compressed air involves certain inherent risks, including but not limited to, air expansion injuries, decompression sickness, embolism and drowning. Hyperbaric injuries can occur that require treatment in a recompression chamber. I further understand that this activity may be conducted at a site that is remote, either by time or distance or both, from such a recompression chamber. I still choose to proceed with such activity in spite of the possible absence of a recompression chamber in proximity to the dive site. I declare 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 any drugs that are contra indicatory to diving. If I am taking medication, I declare that I have seen a physician and have approval to dive while under the influence of the medication/drugs. I understand that skin and scuba diving are physically strenuous activities and that I will be exerting myself during this activity and that if I am injured as a result of heart attack, panic, hyperventilation, etc., that I assume the risk of said injuries and that I will not hold the Released Parties responsible for the same. I will inspect all of my equipment prior to the activity. I will not hold the Released Parties responsible for my failure to inspect my equipment prior to diving. In consideration of being allowed to participate in this activity, I hereby personally assume all risks in connection with the dive(s) for any harm, injury or damage that may befall me while I am a participant, including all risks connected therewith, whether foreseen or unforeseen. I further save and hold harmless said activity and Released Parties from any claim or lawsuit for personal injury, property damage, or wrongful death, by me, my family, estate, heirs, or assigns, arising out of my participation in this activity, including both claims arising during the activity or after I complete the activity. I further declare 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. I understand that the terms herein are contractual and not a mere recital, that this instrument is a legally binding document, and that I have signed this document of my own free act.

Medical Treatment: In the event of an emergency, I authorize the UA Dive Club to seek medical treatment on my behalf. I understand that I am responsible for any medical expenses incurred as a result of such treatment.

Assumption of Risk: I acknowledge that I am voluntarily participating in UA Dive Club activities and assume all risks associated with such participation. I understand that I am responsible for my own safety and well-being during these activities.

I, _____, BY THIS INSTRUMENT DO HEREBY EXEMPT AND RELEASE the United Dive Club and United Airlines, AND THE ORGANIZERS AND PROMOTERS OF THIS EVENT, AND ALL RELATED ENTITIES AS DEFINED ABOVE, FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO PRODUCT LIABILITY OR THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE. I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

By signing here, I agree to all of the above _____ Date: _____

Signature of Parent or Guardian (where applicable) _____ Date: _____