

FLORIDA KEYS DIVE CENTER
90451 OLD HIGHWAY, TAVERNIER, FL. 33070
FLORIDA KEYS DIVE CENTER'S BOAT TRAVEL, SCUBA DIVING, SKIN DIVING AND
SNORKELING RELEASE AND ASSUMPTION OF RISK AGREEMENT

Please read carefully and fill in all blanks before signing.

I, _____, hereby affirm that I am a skin diver, a snorkeler, a boat passenger, a
(Passenger/Diver/Snorkeler)

certified diver or a student diver under the control and supervision of a certified scuba instructor, and that I thoroughly understand the hazards of scuba diving including those hazards occurring during boat travel to and from the dive site as well as during the dive or snorkel activity (**hereinafter collectively referred to as "Excursion"**), which may result in serious injury or death. I understand that these hazards include, but are not limited to, air expansion injuries, drowning, decompression sickness, slipping or falling while on board, being cut or struck by a boat while in the water, injuries occurring while getting on or off a boat, and other perils of the sea. By signing this release, I certify that I am fully aware of and expressly assume these and all other risks involved in such an Excursion, whether conducted as a recreational dive or part of a diving class.

I understand and agree that neither the vessel crew - including captain, mates or dive professionals acting as guides and/or surface support, nor Florida Keys Dive Center Inc.-including its owners, officers, employees, agents or assigns, nor the Big Dipper, the Orion or any other vessel chartered by Florida Keys Dive Center, hereinafter (**referred to as "Vessels"**) nor PADI Americas, Inc., nor its affiliate or subsidiary corporations, nor the owners, officers, employees, 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 injury, death, property damages or other damages to me, my family, estate, heirs or assigns, that may occur as a result of my participation in this Excursion or as a result of the negligence of any party, including the Released Parties, whether passive or active.

I also understand that skin diving, snorkeling and scuba diving are physically strenuous activities and that I will be exerting myself during this **"Excursion"**, and that if I am injured as a result of heart attack, panic, hyperventilation, drowning or any other cause, that I expressly assume the risk of said injuries and that I will not hold the **"Released Parties"** responsible for the same. I further state 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 the terms herein are contractual and not a mere recital, and that I have signed this Agreement of my own free act and with the knowledge that I hereby agree to waive my legal rights. I further agree that if any provision of this Agreement is found to be unenforceable or invalid, that provision shall be severed from this Agreement. The remainder of this Agreement will then be construed as though the unenforceable provision had never been contained herein.

I understand and agree that I am not only giving up my right to sue the **"Released Parties"** but also any rights my heirs, assigns, or beneficiaries may have to sue the **"Released Parties"** resulting from my death. I further represent I have the authority to do so and that my heirs, assigns, or beneficiaries will be estopped from claiming otherwise because of my representations to the **"Released Parties"**.

I, _____, **BY THIS INSTRUMENT, AGREE TO EXEMPT AND**
(Passenger/Diver/Snorkeler)

RELEASE ALL THE ABOVE LISTED ENTITIES AND/OR INDIVIDUALS FROM ALL LIABILITY AND RESPONSIBILITY 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 AND MY HEIRS OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

It is my intention that this release be valid and enforceable on the day of my signature and continuing in nature for a period of _____ days thereafter.

SIGNATURE: _____ DATE: _____

PRINT NAME: _____

PHONE #: _____ ADDRESS: _____

E-MAIL: _____

PARENT/GUARIDIAN SIGNATURE: _____ DATE: _____

PLEASE BE SURE TO ALSO READ & SIGN BACK OF SHEET