



# Outdoor Adventures Unlimited Inc., d.b.a. Divers Supply

## Assumption of Risk and Liability Release

**Participant Name :** \_\_\_\_\_  
(Print Your: First Name - Middle Initial - Last Name)

**FORM MHB L - 01**  
**DIVING**

**Activity release is to Cover:** \_\_\_\_\_

**Participant Certification Level:** \_\_\_\_\_ **Cert. Number:** \_\_\_\_\_  
*Instructor (print full name and instructor number)*

1) \_\_\_\_\_ 2) \_\_\_\_\_

3) \_\_\_\_\_ 4) \_\_\_\_\_

This Liability Release is a release of your right to sue. This release will be used against you in a court of law, if you sue any party or person listed in this release.

Please read carefully before signing. If you have any questions please have them answered to your satisfaction before signing this release. Your signature indicates that you fully understand this release and it is your intention to exempt and release Outdoor Adventures Unlimited Inc., d.b.a. Divers Supply and all of their staff members, PADI , IANTD, all dive instructors, dive masters, boats, boat crew, boat owners and all other related persons or entities from all liability or responsibility whatsoever for personal injury, property damage or wrongful death however caused, including but not limited to, the negligence or the gross negligence of the released parties, whether passive or active.

\_\_\_\_\_  
**Signature of Participant (Diver or Students)**      **Date**

\_\_\_\_\_  
**Signature of Guardian**      **Date**

I, the participant hereby affirm that I have been advised and thoroughly informed of the inherent hazards of diving and using compressed gases underwater. That using compressed air, NITROX, or any mixed gases, predisposes me to certain hyperbaric problems, squeeze, Vertigo, Arterial Gas, Embolism, Mediastinal and Subcutaneous Emphysema, Pneumothorax, Nitrogen Narcosis, Oxygen Toxicity, Decompression Sickness, Compression Pains, and other hyperbaric problems. Hypoxia, Hypothermia and Drowning are also a danger when diving. Hyperbaric injuries require treatment in a recompression chamber. Diving trips for fun, training and/or certification may be conducted at locations remote from a recompression chamber facility. It could take a long time to reach a chamber facility, and I still choose to proceed with my diving activities.

I understand and agree that neither my instructor(s) whose name(s) are listed above or Outdoor Adventures Unlimited Inc., d.b.a. Divers Supply, PADI, IANTD, all dive instructors, dive masters, boats, boat crew, boat owner, and all other related persons or entities, any training facility or association or any of their respective employees, officers, owners, agents or assigns, (hereinafter referred to as "Released Parties") may not be held liable or responsible in any way for any injury, death, or other damage to me or my family, heirs, or assigns that could occur as a result to my participation in diver training, diver activities or any activities with the Released Parties.

For being allowed to participate in diver training and/or activities, I hereby assume all risk in connection with all aspects of diving activities whether foreseen or unforeseen to include the transportation required to get to the dive sites before, during, and after the diving event. I further save and hold harmless said "Released Parties" from any claim by me, my family, estate heirs or assigns, arising out of my participation in training or diver activities during, before, or after such activities.

I also understand that if I am being transported by company owned or privately owned vehicles to any dive site before, during, and after a diving event that I further save and hold harmless all said "Released Parties".

I further state that I am of lawful age and legally competent to sign this release or I have acquired written consent of a legal guardian. These terms are contractual and not a mere recital and I have signed this document of my own free will. It is my intention as the participant and legal guardian to exempt and release all said "Released Parties".

\_\_\_\_\_  
**Signature of Participant (Diver or Student)**      **Date**

\_\_\_\_\_  
**Signature of Legal Guardian**      **Date**