

PERSONAL INFORMATION

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ E-mail: _____

Departure Date: _____ / _____ / _____ Condo/Hotel: _____ Room # _____
Day Month Year

EMERGENCY CONTACT

Name (*not the person you are diving with!*) Phone Number

Relationship (*Spouse/Sibling/Parent etc.*)

Please include a copy of your completed Medical Questionnaire (together with physicians assessment & signature - if applicable).

We also need a copy of your referral documents, as completed by your initiating instructor.

All documents should be sent to dive@indigodivers.com as soon as you have completed the confined water training and dive theory.

Thank you!

Date of Birth: _____ / _____ / _____ Age: _____
Day Month Year

SIGNATURES

Participant Signature Date _____
Day/Month/Year

Signature of Parent or Guardian Date _____
Day/Month/Year

PAYMENT DETAILS

VISA or Master Card No. : _____ . _____ . _____ . _____

Card Holder Name _____ Security Code _____ Exp.Date. _____ / _____
Month Year

OMIT PAYMENT DETAILS IF PREVIOUSLY SUBMITTED.



GENERAL TRAINING

Please read carefully and fill in all blanks before signing.

Non-Agency Disclosure and Acknowledgment Agreement

I understand and agree that PADI Members ("Members"), including Indigo Divers S#24014 and/or any individual PADI Instructors and Divemasters associated with the program in which I am participating, are licensed to use various PADI Trademarks and to conduct PADI training, but are not agents, employees or franchisees of PADI Americas, Inc. or its parent, subsidiary and affiliated corporations ("PADI"). I further understand that Member business activities are independent, and are neither owned nor operated by PADI, and that while PADI establishes the standards for PADI diver training programs, it is not responsible for, nor does it have the right to control, the operation of the Members' business activities and the day-to-day conduct of PADI programs and supervision of divers by the Members or their associated staff. I further understand and agree on behalf of myself, my heirs and my estate that in the event of an injury or death during this activity, neither I nor my estate shall seek to hold PADI liable for the actions, inactions or negligence of Indigo Divers S#24014 and/or the instructors and divemasters associated with the activity.

Liability Release and Assumption of Risk Agreement

I, participant name, hereby affirm that I am aware that skin and scuba diving have inherent risks which may result in serious injury or death.

I understand that diving with compressed air involves certain inherent risks; including but not limited to decompression sickness, embolism or other hyperbaric/air expansion injury that require treatment in a recompression chamber. I further understand that the open water diving trips which are necessary for training and for certification 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 instructional dives in spite of the possible absence of a recompression chamber in proximity to the dive site.

I understand and agree that neither my instructor(s), Meghan Dingman/Ethan Johnston, the facility through which I receive my instruction, Indigo Divers S#24014, nor PADI Americas, Inc., nor its affiliate and subsidiary corporations, nor any of their respective employees, officers, agents, contractors 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, my family, estate, heirs or assigns that may occur as a result of my participation in this diving program or as a result of the negligence of any party, including the Released Parties, whether passive or active.

In consideration of being allowed to participate in this course (and optional Adventure Dive), hereinafter referred to as "program," I hereby personally assume all risks of this program, whether foreseen or unforeseen, that may befall me while I am a participant in this program including, but not limited to, the academics, confined water and/or open water activities.

I further release, exempt and hold harmless said program and Released Parties from any claim or lawsuit by me, my family, estate, heirs or assigns, arising out of my enrollment and participation in this program including both claims arising during the program or after I receive my certification.

I also understand that skin diving and scuba diving are physically strenuous activities and that I will be exerting myself during this program, 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, participant name, BY THIS INSTRUMENT AGREE TO EXEMPT AND RELEASE MY INSTRUCTORS, Meghan Dingman/Ethan Johnston, THE FACILITY THROUGH WHICH I RECEIVE MY INSTRUCTION, Indigo Divers S#24014, AND PADI AMERICAS, INC. 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 THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE.

I HAVE FULLY INFORMED MYSELF AND MY HEIRS OF THE CONTENTS OF THIS NON-AGENCY DISCLOSURE AND ACKNOWLEDGEMENT AGREEMENT AND LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT BY READING BOTH BEFORE SIGNING BELOW ON BEHALF OF MYSELF AND MY HEIRS.

Participant Signature

Date (Day/Month/Year)

Signature of Parent of Guardian (where applicable)

Date (Day/Month/Year)



STANDARD SAFE DIVING PRACTICES STATEMENT OF UNDERSTANDING

Please read carefully before signing.

This is a statement in which you are informed of the established safe diving practices for skin and scuba diving. These practices have been compiled for your review and acknowledgement and are intended to increase your comfort and safety in diving. Your signature on this statement is required as proof that you are aware of these safe diving practices. Read and discuss the statement prior to signing it. If you are a minor, this form must also be signed by a parent or guardian.

I, _____, understand that as a diver I should:
(Print Name)

1. Maintain good mental and physical fitness for diving. Avoid being under the influence of alcohol or dangerous drugs when diving. Keep proficient in diving skills, striving to increase them through continuing education and reviewing them in controlled conditions after a period of diving inactivity, and refer to my course materials to stay current and refresh myself on important information.
2. Be familiar with my dive sites. If not, obtain a formal diving orientation from a knowledgeable, local source. If diving conditions are worse than those in which I am experienced, postpone diving or select an alternate site with better conditions. Engage only in diving activities consistent with my training and experience. Do not engage in cave or technical diving unless specifically trained to do so.
3. Use complete, well-maintained, reliable equipment with which I am familiar; and inspect it for correct fit and function prior to each dive. Have a buoyancy control device, low-pressure buoyancy control inflation system, submersible pressure gauge and alternate air source and dive planning/monitoring device (dive computer, RDP/dive tables—whichever you are trained to use) when scuba diving. Deny use of my equipment to uncertified divers.
4. Listen carefully to dive briefings and directions and respect the advice of those supervising my diving activities. Recognize that additional training is recommended for participation in specialty diving activities, in other geographic areas and after periods of inactivity that exceed six months.
5. Adhere to the buddy system throughout every dive. Plan dives – including communications, procedures for reuniting in case of separation and emergency procedures – with my buddy.
6. Be proficient in dive planning (dive computer or dive table use). Make all dives no decompression dives and allow a margin of safety. Have a means to monitor depth and time underwater. Limit maximum depth to my level of training and experience. Ascend at a rate of not more than 18 metres/60 feet per minute. Be a **SAFE** diver – **S**lowly **A**scend **F**rom **E**very dive. Make a safety stop as an added precaution, usually at 5 metres/15 feet for three minutes or longer.
7. Maintain proper buoyancy. Adjust weighting at the surface for neutral buoyancy with no air in my buoyancy control device. Maintain neutral buoyancy while underwater. Be buoyant for surface swimming and resting. Have weights clear for easy removal, and establish buoyancy when in distress while diving. Carry at least one surface signaling device (such as signal tube, whistle, mirror).
8. Breathe properly for diving. Never breath-hold or skip-breathe when breathing compressed air, and avoid excessive hyperventilation when breath-hold diving. Avoid overexertion while in and underwater and dive within my limitations.
9. Use a boat, float or other surface support station, whenever feasible.
10. Know and obey local dive laws and regulations, including fish and game and dive flag laws.

I have read the above statements and have had any questions answered to my satisfaction. I understand the importance and purposes of these established practices. I recognize they are for my own safety and well-being, and that failure to adhere to them can place me in jeopardy when diving.

Participant's Signature

Date (Day/Month/Year)

Signature of Parent or Guardian (where applicable)

Date (Day/Month/Year)

BOAT TRAVEL AND SCUBA DIVING VOLUNTARY RELEASE, WAIVER, AND ASSUMPTION OF RISK

Please read carefully and fill in ALL blanks before signing.

I, _____, hereby affirm that I am a certified diver
(passenger/diver)

and that I thoroughly understand the hazards of scuba diving including those hazards occurring during boat travel to and from the dive site. 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 making such a dive or dives, whether conducted as a recreational dive or part of a diving class.

I understand and agree that neither **Chris Alpers, Katie Alpers**, divemasters, crew members, boat captain, or owner of **The Cats Meow and/or the Cats Pajamas**, the vessel, nor International PADI, Inc., nor its affiliate of 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 occurrence on this dive trip which may result in personal injury, property damage, wrongful death or other damage to me or my family, heirs, or assigns that may occur as a result of my participation in this boat trip and scuba dive(s) or as a result of the negligence of any party, including the Released Parties, whether passive or active.

I further state that I am of lawful age and legally competent to sign this liability release, or that I have obtained the written consent of my parent or guardian.

I _____, BY THIS INSTRUMENT, DO HERBY EXEMPT
(passenger/diver)

AND 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 ACKNOWLEDGE THAT I HAVE READ THE FOREGOING PARAGRAPHS, FULLY UNDERSTAND THE POTENTIAL DANGERS INCIDENTAL TO ENGAGING IN THIS BOAT TRIP AND SCUBA DIVE(S), AM FULLY AWARE OF LEGAL CONSEQUENCES OF SIGNING THIS INSTRUMENT, AND THAT I UNDERSTAND AND AGREE THAT THIS DOCUMENT IS LEGALLY BINDING AND WILL PRECLUDE ME FROM RECOVERING MONETARY DAMAGES FROM THE ABOVE LISTED ENTITIES AND/OR INDIVIDUALS, WHETHER SPECIFICALLY NAMES OR NOT, FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY PRODUCT LIABILITY OR THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE.

PRINTED NAME _____

Participant's Signature Date day/month/year

Signature of Parent or Guardian (where applicable) Date day/month/year

LIABILITY RELEASE AND ASSUMPTION OF RISK FOR SUPERVISION OF CERTIFIED DIVERS

PLEASE READ CAREFULLY BEFORE SIGNING.

THIS IS A RELEASE OF YOUR RIGHTS TO SUE **Executive Divers Ltd. , Indigo Divers, Chris Alpers and/or Katie Alpers**
Facility Operator Dive Supervisor
AND THEIR EMPLOYEES, AGENTS, AND ASSIGNS (HEREIN AFTER "RELEASED PARTIES") FOR PERSONAL INJURIES
OR WRONGFUL DEATH THAT MAY OCCUR DURING DIVE ACTIVITIES AS A RESULT OF THE INHERENT RISKS
ASSOCIATED WITH SCUBA DIVING OR AS A RESULT OF THE NEGLIGENCE OF THE RELEASED PARTIES .

1. I acknowledge that I am a certified scuba diver trained in safe diving practices.
2. I am aware of the risks inherent in this sport and accept these risks.
3. I am in good mental and physical fitness for diving, and 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 affirm that I have seen a physician and have approval to dive while under the influence of the medication/drugs.
4. I am aware of the dangers of breath holding while scuba diving, and I will not hold the Released Parties and related entities (such as employees, instructors, certified assistants, boat operators, or diver training agencies) responsible if I am injured doing so.
5. I am aware that I will be diving with a buddy, and it will be our responsibility to plan our dive allowing for our diving limitations and the prevailing water conditions. I will not hold the Released Parties responsible for my failure to safely plan my dive.
6. I will inspect all of my equipment prior to the activity and will notify the Released Parties if any of my equipment is not working properly. I will not hold the Released Parties responsible for my failure to inspect my equipment prior to diving.
7. I acknowledge that I am physically fit to scuba dive, and I will not hold the Released Parties responsible if I am injured as a result of heart, lung, ear, or circulatory problems or other illnesses that occur while diving.
8. I understand that even though I follow all of the appropriate dive practices, there is still some risk of my sustaining decompression sickness, embolism or other hyperbaric injuries, and I expressly assume the risk of said injuries.
9. I expressly assume the risk and accept all responsibility to plan my dive and my dive plan.
10. I understand that scuba diving is a physically strenuous activity and that I will be exerting myself during this diving excursion, and that if I am injured as a result of a heart attack, panic, hyperventilation, etc., that I expressly assume the risk of said injuries and that I will not hold Released Parties responsible for the same.
11. I understand that on this open-water diving trip, I will be at a remote site and that there will not be immediate medical care or hyperbaric care available to me, and I expressly assume the risk of diving in such a remote spot.

12. IT IS THE INTENTION OF _____, BY THIS INSTRUMENT TO EXEMPT

Diver's Name

AND RELEASE **Executive Divers Ltd. , Indigo Divers , Chris Alpers and/or Katie Alpers**

Facility Operator Dive Supervisor

AND ALL RELATED ENTITIES AS DEFINED ABOVE FROM ALL LIABILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE, WRONGFUL DEATH HOWEVER CAUSED, INCLUDING, BUT NOT LIMITED TO, THE NEGLIGENCE OF THE RELEASED PARTIES.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS ASSUMPTION OF RISK AND RELEASE BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Signature of Diver

Date day/month/year

Signature of Parent or Guardian (Where Applicable)

Date day/month/year

At Indigo Divers, we believe in the health & safety of all our divers.

Divers don't need to be Olympic athletes, but they do need a reasonable degree of aerobic fitness, physical stamina, and mobility. Stress and exertion are hazards that must be considered when evaluating health and fitness to dive. We therefore advise all divers over age 40 to visit a cardiologist to undergo risk assessment and exercise testing for coronary heart disease. Stressful underwater situations can get the heart beating faster than normal – with fatal results. Cardiac arrhythmia can worsen during dives and cause heart attacks. Divers with weight & heart issues have a higher mortality risk than that of a decades-older diver who is physically fit. Despite the feeling of weightlessness in water, diving is a very physical sport, and divers need to prep themselves physically for it. Aerobic conditioning is needed for leg kicks, and upper-body strength is required to pull oneself out of the water.

While there's a broad consensus about the criteria for diving fitness, it's essential that both the diver and his physician understand the risks.

Divers with high BMIs are more prone to coronary heart disease and coronary events underwater. A BMI above 30 is considered excessively risky for diving. While body fat is a great insulator, that advantage is outweighed by the higher demands made on an obese person's cardiovascular and pulmonary systems while swimming. Fatty tissue absorbs nitrogen at a rate five times faster than muscle does. Blood supply to fatty tissue is poor, causing a slow release of nitrogen and a greater risk of DCS. Combined with the greater effort needed for breathing, the heavy workload of a diver with a high BMI increases use of oxygen and production of carbon dioxide.

Dive computers are programmed with dive tables for the average-sized person and do not take divers with a high bmi into consideration, which increases their DCS risk. Poor physical conditioning impairs divers' abilities to do self rescues, perform buddy duties, and be rescued by their buddies, who may find it hard to physically pull them out of the water. Therefore, physically unfit buddies can't always be relied upon to come to the rescue in times of need.

Poorly conditioned divers should also take a more sensible approach to diving. Slower ascent rates, reduced bottom time and fewer dives in 24 hours can lessen the DCS risk.

The best method for better diving is improved cardiovascular fitness and a healthier lifestyle.

For a recommended Diving Medical Specialist in your area, please contact DAN (Divers Alert Network) tel. **919-684-2948** (Monday–Friday, 9 a.m.–5 p.m. Eastern).

Click here to email: <http://www.diversalertnetwork.org/myaccount/mscc/emailmedic.asp>

Dive Clearance Physicals are offered by the following local physician:

Dr Denise Osterloh MB ChB
CAYMAN CLINIC
439 Crewe Road, George Town
Grand Cayman,
Cayman Islands.

tel. **345 949 7400** or **345 949 4234**
drosterloh@caymanclinic.ky