



LIABILITY RELEASE AND ASSUMPTION OF RISK FOR SUPERVISION OF CERTIFIED DIVERS

Please read carefully and fill in all blanks before signing

THIS IS A RELEASE OF YOUR RIGHTS TO SUE YONGALA DIVE PTY LTD (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.
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 dive limitations and the prevailing water conditions.
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.
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 dive my 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 the 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 (Diver's name) BY THIS INSTRUMENT TO EXEMPT AND RELEASE YONGALA DIVE PTY LTD AND (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 OR RISK AND RELEASE BY READING IT BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.

Signature _____ Date _____
Signature of Parent or Guardian _____ Date _____

TRAVEL / EXCURSION VOLUNTARY RELEASE, WAIVER & ASSUMPTION OF RISK

Please read carefully and fill in all blanks before signing.

I (Passenger / Diver) hereby affirm that I am voluntarily engaging in the recreational activities planned for my trip to the SS YONGALA (destination) which activities may include but are not limited to, scuba diving, snorkelling, boating and (activities). If I engage in scuba diving, I affirm that I am a 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. I further affirm that I am thoroughly familiar with the hazards of boating, whether or not said boating involves scuba diving or snorkelling activities. By signing this release, I certify that I am fully aware of and expressly assume all risks involved in scuba diving, snorkelling, boating and (activities).

I understand and agree that neither YONGALA DIVE PTY LTD, nor International PADI, 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 occurrence on this 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 trip or as a result of the negligence of any part, 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 (Passenger / Diver) BY THIS INSTRUMENT, DO HEREBY EXEMPT 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 THIS TRIP AND ACTIVITY(IES), AM FULLY AWARE OF THE 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 NAMED 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 _____
Signature _____ Date _____
Signature of Parent or Guardian _____ Date _____



Name: _____
First Middle Last

Address: _____

Phone : _____

Date of Birth: _____ Email address: _____

Emergency contact Name & No.: _____

Certification Agency: PADI SSI CMAS NAUI FAUI BSAC Other _____

Certification Level: _____

Certification Date: _____ Certification No.: _____

No. of logged dives: _____ Date of last dive: _____

Deepest dive: _____ No. of dives > 20m: _____

Have you ingested any alcohol in the last 8 hours ? YES NO

Are you currently taking any medication (except oral contraception) YES NO

If yes please specify _____

Have you ever had or do you currently suffer from any of the following injuries ?

- ear/sinus squeeze YES NO
- decompression sickness YES NO
- lung expansion injury YES NO
- Other serious injury YES NO

Have any serious medical conditions arisen since your certification YES NO

If yes please specify _____

How do you rate your current health? _____

Have you had any illness/operation within the last 6 months (other than usual colds or flu) YES NO

If yes please specify _____

Do you understand you should not go to altitude (fly) within 18 hours of completing multiple dives ?

YES NO

Do you have D.A.N. or other diving insurance ? YES NO

Details _____

I also understand and agree that I should not penetrate the wreck of the SS Yongala

Print Name _____

Signed _____

Date _____