### Statement of Risk and Liability/ Non-agency Acknowledgment Form

# **GENERAL TRAINING**

(EU Version)

#### 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 SMG SCUBA/resort and/or any individual PADI Instructors and Diversets 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 EMEA Ltd., 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.

## Statement of Risk and Liability

This is a statement in which you are informed of the risks of skin and scuba diving. The statement also sets out the circumstances in which you participate in the diving programme at your own risk.

Your signature on this statement is required as proof that you have received and read this statement. It is important that you read the contents of this statement before signing it. If you do not understand anything contained in this statement, then please discuss it with your instructor. If you are a minor, this form must also be signed by a parent or guardian.

#### Warning

Skin and scuba diving have inherent risks which may result in serious injury or death.

Diving with compressed air involves certain inherent risks; decompression sickness, embolism or other hyperbaric injury can occur that require treatment in a recompression chamber. Open water diving trips that 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. Skin and scuba diving are physically strenuous activities and you will be exerting yourself during this diving programme. You must advise truthfully and fully inform the dive professionals and the facility through which this programme is offered of your medical history.

Acceptance	e of Risk
understand and agree that neither the dive professionals cornor the facility through which this programme is conducted, SPADI Americas, Inc. nor their affiliate or subsidiary corporation contractors or assigns accept any responsibility for any death, in from my own conduct or any matter or condition under my contractors.	ns, nor any of their respective employees, officers, agents, njury or other loss suffered by me to the extent that it result
In the absence of any negligence or other breach of duty instructor(s), the facility thresholds the store of the properties of the propert	rough which this programme is offered, PADI Americas, Inc. and all parties referred to above, my
HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF ACKNOWLEDGMENT AGREEMENT AND STATEMENT OF R SIGNING THESE STATEMENTS.	
Participant Name (Please Print)	-
Participant Signature	Date (Day/Month/Year)
Signature of Parent/Guardian (where applicable)	Date (Day/Month/Year)