## PLEASE COMPLETE ALL SECTIONS

Full Name:		DOB:	/		Age:	
			Day Month			
Home Address:						
City:	State:	_Zip:	c	ountry:_		
Phone:	F₋mail:					
Condo/Hotel:	Room#_	Depa	arture Date:_	Da	/ Mon	
EMERGENCY CONTACT						
<u>LIVILITALINOT CONTACT</u>						
Name (not the person you are diving with!)		Pho	ne Number			
Relationship (Spouse/Sibling/Parent etc.)						
CERTIFICATION DETAILS						
Dive Agency: Level:_	(OM//ADV//DM)	_ Cert Card N	umber:			
(PADI) 331/ IVAUI)	(OW / ADV / DIVI).					
Date of most recent dive:/ Local	ation:	First			No. of Di	ves:
Month/Year				Year		
PAYMENT DETAILS						
VISA . Mastercard . AMEX :	·			·	·	
Name on card		Security (	Code	Exp.	Date	
OR - Credit card details previously su	bmitted through	RESERV	ATIONS LIN	IK 🗌		
Cancellation Policy			TELEPHON	E 🗌		
Activities cancelled within 48 hours of the activity. Advanced reservations may be cathan 7 days, but more than 48 hours notice. For the period December 18th to January Notice must be received in writing to dive charged at 100% of the scheduled activity. Divers are able to re-sell your reservation,	ncelled with minime, will be charged to the charged	um 7 days notion	ce, at no charg ate of the sch ) weeks notice celled with les ake fees exclu	ge. Activi eduled a e of canc s than 4	ties canc ctivity. ellation is weeks no	elled with less s required. otice, will be
I, the undersigned, accept & agree to	the terms of the o	cancellation po	olicy outlined	l above.		
Participant Signature			D	ate		lonth Mass
r arnulpant Signature					Day/IVI	onun tear
Signature of Parent or Guardian			Da	ate		/ onth/Year

## **INDIGO DIVERS**

## **WAIVER, RELEASE & INDEMNITY AGREEMENT**

This is a release of your rights to engage in any legal action involving Indigo Divers or Executive Divers Ltd. (herein after referred to as THE COMPANY) or any of it's employees, agents and assigns for personal injuries or wrongful death that may occur during

the forthcoming dive, snorkel and/or watersports activity (including boat transportation) as a result of the inherent risks					
associated with such activity or as a result of negligence.					
After reading, sign your INITIALS next to each of the following statements.					

Signature of Parent or Guardian	Date	
NAME (please print)	Signature of Participant	
acknowledge that I have read the foregoing	g paragraphs and expressly agree to all of them.	
operation of the dive computer, whether my own or provipractices prior to any diving activities. I agree to stay wit recommendations the dive computer displays. I agree th	a dive computer at all filles and hereby all miles to ship responsibility to diddense ided to me by THE COMPANY, that I will use in conjunction with safe diving thin the no-decompression limits of the dive computer and will follow the lat if the computer recommends I do not dive for any reason I will refrain from ds and understand that THE COMPANY will adhere and defer to the	doing
care available to me, and I expressly assume the risk of or Procedures, regulations or Laws of the Cayman Islands to	diving in such a remote spot. I understand that if I violate any Standards and	
I also expressly assume the risk and accept the	o I will be at a remote site and that there will not be immediate medical and/or hyper	rbaric
embolism or other hyperbaric injuries and I expressly ass	•	
execute my dive I understand that even if I follow all the appropriate the execute my dive.	onditions. I will not hold THE COMPANY responsible for my failure to safely plan oriate dive practices, there is still some risk of sustaining decompression sickness,	and
	hat I dive with a buddy, and it will be my responsibility to locate a buddy, and plan a	a dive,
	rhile scuba diving, and will not hold THE COMPANY or any of it's employees, instruc	ctors,
SCUBA DIVERS ONLY:		
wrongful death, shall be prosecuted by/or on my behalf a	tors or assigns, agree that in the event of any claim for personal injury, property dan against THE COMPANY, it's officers, employees, agents or assigns, I or my estate claims or causes of action by whomever or wherever made or presente	shall
Islands to the exclusion of any other courts.	g to the laws of the Cayman Islands and shall be adjudicated in the courts of the Ca	
at my own risk and hereby release THE COMPANY and it claims, loss, damage, injury, and liability arising from any watersports; caused or occasioned by reason of the periof any other diver(s), snorkeller(s), or person(s) engaged is such person(s) unfit for diving, snorkelling, or any waters watersports.	nat scuba diving, snorkeling and other watersport activities (including boat transport t's officers and employees, agents and assigns and save them harmless from all vinjury and/or illness sustained by me while engaged in diving, snorkelling, or any ills or dangers of the sea; or by reason of the act of omission, negligence or in watersports or as a consequence of illness or disease or disability which resports, and I hereby expressly assume all risks of scuba diving, snorkeling and/or of the season of the season of the season of the act of omission, and I hereby expressly assume all risks of scuba diving, snorkeling and/or of the season of the act of omission, negligence or in watersports or as a consequence of illness or disease or disability.	default enders other
regarding the equipment provided by it, including any was impractical for THE COMPANY to fully test each piece of equipment and does not warrant that it is suitable for any agents, or assigns responsible for my failure to inspect mown risk. I shall return the same in good order and working	edge that THE COMPANY makes no express or implied warranties arranty of merchantability, fitness for a particular purpose or otherwise, as it is f equipment onshore. THE COMPANY accepts no responsibility for any defect in y particular purpose. I will not hold THE COMPANY or any of it's employees, ny equipment prior to the activity and I agree that the use of said equipment is at ng condition and shall be financially liable for any deviations therefrom.	the my
EQUIPMENT - I hereby accept all responsibilit	ty for proper functioning of the equipment and accept the equipment in the conditio affirm that I have examined the equipment prior to the activity and have satisfied	n as is myself
It is the intention of the undersigned by this in	strument to exempt THE COMPANY and it's officers and employees, agents and as personal injury, property damage and wrongful death caused by negligence.	ssigns as
· · · · · · · · · · · · · · · · · · ·	a physically strenuous activity and that I will be exerting myself during this diving ttack, panic, hyperventilation etc., that I expressly assume the risk of the said employees, agents, or assigns responsible for the same.	
	a dive/snorkel, and I will not hold THE COMPANY or any of it's employees, agents, ong, ear, circulatory problems or other illnesses that occur while diving and/or	or
	I am taking medication, I affirm that I have seen a physician and have approval to	dive
	scuba diving and accept these risks. nysically fit for diving, and that I am not under the influence of alcohol, nor am I unde	er the