

PLEASE FILL AND SEND BACK TO info@bluebaydivers.de Cause of slow internet connection in sahaung, please keep the documents small

ACKNOWLEDGEMENT OF ADVICE AND CONFIRMATION OF ASSUMPTION OF RISK

(Please read carefully, fill in all blanks and initial each paragraph before signing)

I,	(diver's nan	e) hereby	acknowledge	that I have	been	advise	and
thoroughly informed of the inherent	risks of skin	diving an	d scuba diving				

In particular, I acknowledge that:

- 1. Dive From KLM SUNSHINE only with EAN32 and the depth is strictly limited to 30m
- 2. Diving with compressed air / nitrox involves certain inherent risks of decompression sickness, embolism and disablement.
- 3. Injuries of the type referred to in above may require treatment in a recompression chamber.
- 4. Open water trips may be conducted at a site that is remote either by time and/or distance from recompression chamber.
- 5. Skin diving and scuba diving are physically demanding activities and in susceptible individuals may cause heart attack, panic or hyperventilation.
- 6. Scuba diving involves the use of equipment that may malfunction giving rise to risk of deaths or disablement.
- 7. Skin diving and scuba diving necessarily involve exposure to the natural elements including but without limiting the generality here of storm, tempest, tides and marine life. Such exposure brings with attendant risk of death or disablement.
- 8. **BlueBayDivers** can not be held responsible for deep dives deeper than 30 meter.
- 9. I will dive within my current certification; any dive over my training limit will therefore be at my own risk.
- 10. I will follow the instructions given by the dive instructor/ dive master/ dive guide and the boat captain before, during and after each dive.
- 11. I have in mind, that the Cruise with KLM SUNSHINE will be in remote areas where no direct medical care or hospital facilities will be available.

I acknowledge that prior to commencing my dives with **BlueBayDivers** I completed attached Diver's History statement, detailing my medical fitness.

I further acknowledge that having been advised of the risk associated with skin diving and scuba diving. I wish to undertake dive activities with **BlueBayDivers** and hereby release and hold harmless **BlueBayDivers**, its agents and employees, from any suit, demand or claim arising as a consequence of death of injury received by me during my participation in the said activity for the entire period of my cruise.

I further acknowledge that this document may be relied upon in any proceedings instituted in any court by me or my heirs, executors and assigns.

Date	
	•••••
Signature of Diver	Signature of Parents/ Guardian
	(if under 18 years of age)



INFORMATION FOR SCUBA DIVERS

Few dive locations in the world can compare with the object of BlueBayDivers Boat Sunshine. To ensure that your dive is both present or complete (at sahaung, before the trip) the following its Dive certification Nitrox Compared to the compa	h safe and enjoyable, it is necessary to ems: ertification form liability form
 Diving details We supply tanks and weight & belts Safety sausage for rental is available on board Bring your camera and dive light alkaline batteries We have 220 V aboard Rental equipment is available 	
Diving Experience	
 SCUBA Certification	Never dinghy??
 Are you allergic of something and therefore require special in 	medications?
I, the undersign, hereby certify that I have understood the above true and accurate record.	ve questions and that my answer are a
Signature	Date



DIVERS DATA

(This form must be completed by each passenger wishing to use SCUBA diving equipment)

Cruise departure date	·	•	
Family name	:	. Given name : .	
Date of birth	:	. Sex	:
Passport. no.	:	. Nationality	:
Address	:		
E-mail Address :			
Phone/Fax Number	:		
My emergency addre	ss		
Name	:		
Phone + fax	:		
Address	:		
My Insurance			
Name and insurance no	D.:		
Phone + fax	:		
Address			