Liability Release and Assumption of Risk Agreement

Please read carefully and fill in all the blanks before signing.	
I, hereby ational activities planned for the trip to, which activities may include, but not limited to: ming and any other activities that are made possible because of am a certified diver or a student under the control and supervise that planned water activities such as skin and scuba diving hadeath. I certify that I am fully aware and expressly assume all scuba diving, snorkeling, free-diving, boating, swimming and this charter.	of this trip. If I engage in scuba diving, I affirm that I ion of a certified scuba instructor, and that I am aware ave inherent risks that may result in serious injury or risks that may be associated with my involvement in:
I understand and agree that neither Pro Scuba Training, LL Technology , GT Scuba , PADI Inc. nor any of their affiliate employees, agents, contractors, or assigns of the above listed may be held liable or responsible in any way for injury, death that may occur as a result of my participation of this trip or as Released Parties, whether passive or active.	or subsidiary corporations, nor the owners, officers, entities (hereinafter referred to as Released Parties) or damages to me, my family, estate, heirs or assigns
I further state that I am of lawful age and legally competent to sign this Liability Release Agreement, or I have obtained written consent from my parent or guardian. I understand that 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 enforceable provision had never been contained herein.	
I understand and agree that I am not only giving up my right to heirs, assigns, or beneficiaries may have to sue the Released I have the authority to do so and that my heirs, assigns or be because of my representations to the Released Parties.	Parties resulting from my death. I further represent
I	DIVIDUALS, WHETHER SPECIFICALLY NAMED FOR PERSONAL INJURY, PROPERTY DAMAGE ING BUT NOT LIMITED TO, PRODUCT LIABILS, WHETHER PASSIVE OR ACTIVE.
SELF AND MY HEIRS. Signature of Participant	Date (Day/Month/Year)
Signature of Parent or Guardian (where applicable)	Date (Day/Month/Year)