Non-Agency Disclosure and Acknowledgment Agreement

I understand and agree that PADI Members ("Members"), including _ and/or any individual PADI Instructors and Divernasters 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

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.

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 of Risk

instructor(s)	, nor the facility through which this	
	_, nor PADI EMEA Ltd., nor PADI A	
affiliate or subsidiary corporations, n		
contractors or assigns accept any reto the extent that it result from my own amounts to my own contributory neg	n conduct or any matter or condit	
In the obsence of any negligence or this programme,instr programme is offered,Inc. and all parties referred to above	ructor(s) , the facility the store/resort , PADLE	nrough which this EMEA Ltd., PADI Americas
own risk.		
I have fully informed myself disclosure and acknowled liability by reading both befo	gment agreement and sta	TEMENT OF RISK AND
Participant Name (I	Please Print]	
Participant Sig	gnature	Date (Day/Month/Year)
Signature of Parent/Guardia	 an (where applicable)	Date (Day/Month/Year)

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