

DISCLAIMER

Please complete all details clearly in print.



Name:-----

Address: -----

Email:-----

Telephone of next of kin: -----

Diving Qualification: -----

Date of last dive: ----- Total number of dives completed: -----

Please describe any camera/video equipment you have with you: -----

Insurance Company name: -----

Policy No: -----

Insurance Company Emergency Telephone No: -----

- Please tick this box if you do not wish to receive our occasional newsletter "Lateral Lines" giving details of special offers and our new schedules.

I am aware of the risks of scuba diving and agree to the following statements:

- I am physically and mentally fit for diving.
- I do not suffer from any illness that could put my life in danger if I go diving.
- I will avoid being under the influence of alcohol, drugs or dangerous medicines when I am diving.
- I will only take on activities that are within the limits of my training and experience.
- I will agree to use a dive computer at all times, and to refrain from sharing one.
- I understand that the Maldives is a remote area and that no refund will be made if there is a change in planned diving or vessel itinerary due to adverse weather conditions or equipment breakdowns once a safari has begun.
- I will adhere to the buddy system during each dive.
- I will respect the knowledge of the dive guide and dive in accordance with his/her instructions.
- I have read and understood the safety issues outlined in the Information Brochure supplied to me.

I, the undersigned, exempt Scuba Tours Worldwide and the relevant personnel of any responsibility for my activities during my stay here in the Maldives including damage to or loss of my gear. I am fully aware of the contents of this disclaimer notice and I sign it in full understanding of its significance.

Signed: -----

Dated:-----