



# Chucho Divers

[www.chuchodivers.com](http://www.chuchodivers.com)

Cell: (987) 117-4633

[chuchodivers@gmail.com](mailto:chuchodivers@gmail.com)

## Diver Release Information and Standard Statement of Safe Practices

Printed Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

DATES DIVING: \_\_\_\_\_ HOTEL: \_\_\_\_\_ ROOM #: \_\_\_\_\_

CERT Agency \_\_\_\_\_ C-CARD NUMBER: \_\_\_\_\_ Cert Date: \_\_\_\_\_

Level of CERT - Beginner, Intermediate or Advanced Date of Last Dive \_\_\_\_\_

Number of Logged Dives: \_\_\_\_\_ Location \_\_\_\_\_ Max Depth? \_\_\_\_\_ft

Are you using a dive computer? Y/N

Do you have mental/physical ailments that would keep you from diving? Y/N

Medications? \_\_\_\_\_ Have you been released by a physician? Y/N

**EQUIPMENT RENTAL:** YES/NO **BCD Size:** \_\_\_\_\_ **Reg/Gauges** Y/N **Mask** Y/N

**Fin Size** \_\_\_\_\_ **Snorkel** Y/N **Wet Suit Size** \_\_\_\_\_ **Light** Y/N

### Standard Statement of Safe Diving Practices

This is a basic statement of safe diving practices for scuba diving. By signing below, you acknowledge and are aware of these practices and standards while in Cozumel, Mexico.

I am aware of the inherent risks of scuba diving and understand that as a diver I must:

- Maintain good mental and physical fitness for diving.
- Avoid diving under the influence of alcohol or drugs. *\*\*Chucho Divers reserves the right to disqualify a customer from the dive if it is perceived you are still under the influence or has a hangover\*\**
- Will not engage in scuba diving activities that you are not trained, equipped or experienced in
- Listen carefully to every dive briefing and follow the dive plan
- Respect the advice of the Dive Master, Dive Instructor, dive boat crew and captain
- I will not exceed the depth/time limits planned by the Dive Master or my personal computer, whichever is less
- I WILL NOT DIVE SOLO and follow the buddy system at all times. I will dive with my group as required by my Dive Master and Cozumel Marine Park.
- Ascend no faster than 30 feet per minute and make safety stops on all dives
- Adhere to Cozumel Marine Park rules. Absolutely no fish, coral, or shell collecting while diving off boats or offshore.

I have read the above statements and understand the importance and purpose of Safe Diving Practices and fully recognize that they are for my own safety and understanding and that failure to adhere to any can and may place me in jeopardy and can increase risk of injury and/or death.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian,if under 18 yrs old: \_\_\_\_\_



# Chucho Divers

[www.chuchodivers.com](http://www.chuchodivers.com)

Cell: (987) 117-4633

[chuchodivers@gmail.com](mailto:chuchodivers@gmail.com)

## **LIABILITY AND ASSUMPTION OF RISK**

(Please fill in all blanks and initial all statements)

I, \_\_\_\_\_ (print name), hereby affirm that I have been well advised and thoroughly informed of the inherent risk of skin and scuba diving.

\_\_\_\_\_ I understand and agree that Chucho Divers, captains, Dive Masters, Dive Instructors, leaders, crew members, owners, officers, employees, agents, or any scuba training agency, or assigns of the above listed individual(s) and/or entities (hereinafter "Released Parties") will not be held liable or responsible in personal injury, property damage, wrongful death or other damage to me my family, heirs, or assigns that may occur as a result of my participating in the boat trip and scuba dive(s) or as a result of the negligence of any party, including the Released Parties.

\_\_\_\_\_ If I rent or borrow equipment from Chucho Divers, or any of the Released Parties, I agree to examine it and use it only if I find it to be in safe and working condition. I agree to pay the full replacement cost of any rent or borrowed items in case of loss or damage.

\_\_\_\_\_ I understand that diving with compressed and any mixture of oxygen and nitrogen (NITROX) air involves certain inherent risks; decompression sickness, embolism, or other injuries can occur that require treatment in a recompression chamber. I still chose to participate in certified scuba diving.

\_\_\_\_\_ In consideration of being allowed to participate in these diving activities, I hereby personally assume all risks in connection with said diving activities, for any harm injury or damage that may befall me while I participate in these activities, including all risks connected therewith, whether foreseen or unforeseen.

\_\_\_\_\_ I further hold harmless Released Parties from ANY claim or lawsuit by me, my family estate, heirs, or assigns arising out of my participation in these diving activities including both claims and lawsuits arising during said participation or thereafter.

\_\_\_\_\_ I also understand that skin diving and scuba diving are physically strenuous activities and that I will be exerting myself during said activities and that if I am injured as a result of a heart attack, panic, hyperventilation, etc. that I will not hold the above listed individuals or companies responsible for the same.

\_\_\_\_\_ I further state that I am of lawful age and legally competent to sign this liability release or that I have acquired the written consent of my parent or legal guardian. I understand that the terms herein are contractual and not a mere recital and that I have signed this document of my own free act.

It is the intention of \_\_\_\_\_ (print name) by this instrument to exempt and release any and all related entities as defined above, from all liability or responsibility whatsoever. I have fully informed myself of the contents of this liability release and express assumption of risk by reading it before I signed it on behalf of myself and my heirs.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian if under 18 yrs old: \_\_\_\_\_