

SAN DIEGO SHARK DIVING EXPEDITIONS RELEASE/WAIVER

I, _____, fully understand that as a certified SCUBA diver I know that all diving and water related activities are inherently dangerous. I know there are many factors even the most experienced dive masters, boat captains, or boat crews cannot control. I know that traveling on, to or from a boat, is considered to be inherently dangerous.

_____(Read & Initial)

I fully understand that I have chosen to participate in an expedition whose primary intent is to view sharks in close proximity to me while I am in, on, or near the ocean. I know that sharks are considered to be dangerous and unpredictable. Other animals and water conditions might also present dangers that can not be controlled.

_____(Read & Initial)

I am keenly aware that on expeditions similar to the one I am choosing to take part in, that is in expeditions in which sharks and sea life are in close proximity to divers or near people on boats, that people have been bitten or otherwise injured by sharks and other sea life. I know that such injuries can be fatal, or cause severe irreparable injury. I also know equipment problems, etc. and human error can cause injury or death. No warranties have been made with respect to the use of any equipment. All equipment provided by or on behalf of San Diego Shark Diving Expeditions is accepted "as is"

_____(Read & Initial)

I, on behalf of myself and any minor children for whom I am responsible, freely and voluntarily assume all risks whatsoever involved in these dives, use of the boat and all equipment thereto, related activities and instructions thereto, both in the water and on or near the boat.

_____(Read & Initial)

IT IS MY INTENT TO RELEASE PAUL ANES, SAN DIEGO SHARK DIVING EXPEDITIONS, THE VESSEL *HORIZON*, HORIZON CHARTERS, AND ANY OF THEIR EMPLOYEES OR AGENTS, FROM ANY LIABILITY WHATSOEVER FOR ANY NEGLIGENCE, OR OTHER LIABILITY WITH RESPECT TO ALL DUTIES OWED BY THEM. I VOLUNTARILY ASSUME ALL RISKS OF PERSONAL INJURY, PROPERTY DAMAGE, OR DEATH ON BEHALF OF MYSELF AND ANY MINOR CHILDREN FOR WHOM I AM LEGALLY RESPONSIBLE.

_____(Read & Initial)

By my signature, I verify that I have read and understood the foregoing, and voluntarily agree to this document's contents..

SIGNATURE: _____ DATED: _____

BIRTH DATE _____ # OF CAREER DIVES _____ DATE OF LAST DIVE _____

TYPE OR PRINT NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTRY: _____

HOME PHONE: _____ WORK PHONE _____

FAX: _____ CELL PHONE _____

E-MAIL: _____ WEB SITE: _____