DIVE INJURY EXPENSE PROTECTION

Waiver and Declaration:

I understand that diving with compressed gas involves certain inherent risks; including but not limited to decompression illness, embolism or other hyperbaric/air expansion injury that may require treatment in a hyperbaric chamber.

I also understand that snorkelling and scuba diving are physically strenuous activities and that if I am injured as a result of heart problems, drowning or any other cause, that I expressly assume the risk of said injuries.

Responsibility for Expense:

I understand that I am responsible for the cost of any evacuation and hyperbaric chamber treatment for illness or injuries related to scuba diving or snorkelling.

<u>Please tick applicable box:</u>
I have insurance to cover the expense of evacuation and treatment related to scuba diving or snorkelling through:
A. Membership in one of the worldwide DAN non-profit dive safety organizations; [check] (DAN Asia-Pacific,DAN America,DAN Europe,DAN Japan,DAN Southern Africa,, or,
B. Other Insurance (company name)
I WOULD LIKE TO BE COVERED FOR THE EXPENSE OF EVACUATION AND TREATMENT RELATED TO SCUBA DIVING AND SNORKELLING.
I do not have and do not wish to purchase insurance to cover the expense of evacuation and treatment related to scuba diving or snorkelling. I agree to <u>not</u> hold (Dive Business Name) or its staff or management responsible for the expense of evacuation or treatment related to the in-water activities of scuba diving or snorkelling.
Last nameFirst name
Date of Birth (DD/MM/YYYY)/Email:
Street address
CityStatePostal Code
Country
Date: (day/month/year DD/MM/YYYY) / / Signature

For diving emergencies, call DAN Asia-Pacific's free, public service 24 hour hotline +61-8-8212-9242

www.danasiapacific.org