

**INTRODUCTION TO / DISCOVER SCUBA APPLICATION & WAIVER**

NAME: First: \_\_\_\_\_ Last \_\_\_\_\_

TEL.#: \_\_\_\_\_ E-Mail: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ AGE: \_\_\_\_\_

**PREREQUISITES ARE :**

**Must be 12 - 112 years of age.**

**If under 16 your parent or guardian must be present at the pool and sign off on application.**

**In the case of Cadets, a Cadet officer is fine.**

**Submit a medical questionnaire as provided.**

PSE Can Charge my Visa/ Master Card the amounts indicated or in full (circle one)	
Card # _____	Expiry _____MM_____YY
Security # _____	

Diving Event Waiver and Release EVENT: Introduction to SCUBA

In consideration of my being permitted to take part in the aforementioned event, I, for myself, my heirs, executors, administrators and assigns, waive any claims, including but not limited to negligence claims, to which I may be entitled for injury or damage and release all the organizers of the abovementioned event, their appointees, Pretty Safe Enterprises and its directors and dive organizers, Memorial University of Newfoundland and any other person assisting in this event from any and all claims, actions, costs, expenses and demands in respect to death, injury, loss or damage to my person or property however caused, suffered by me as a result of my participation in, preparation for, or travelling to or from this event or because of failure or malfunction for any reason whatsoever of equipment belonging to said organizers, or their appointees, or any other person assisting in this event, and notwithstanding the same may have been contributed to or occasioned by the negligence of said organizers, or their appointees, or any other person assisting in this event.

I further state that I am in proper physical and mental condition to participate in this event and I hold the minimum qualifications required to participate in this event.

I am aware that diving can be a hazardous activity, and could result in physical injury. .

**PHOTOGRAPH PERMISSION** – I do / do not (circle one) authorize the staff of Pretty Safe Enterprises to take my picture and to use it as they see fit in the promotion and instruction of SCUBA diving only.

\_\_\_\_\_  
NAME OF APPLICANT (Please Print)

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
NAME OF WITNESS **OR** GUARDIAN (if Under 18)  
(Please print)

\_\_\_\_\_  
SIGNATURE WITNESS

DATE: \_\_\_\_\_