



First Name

Last Name

By placing my name here, I agree to be responsible for the content of this page.

SSI Explorers | Assumption of Risk, Liability Release & Hold Harmless Agreement

(Form not to be used within the European Union and various other countries depending on local laws/regulations - The SSI Training Center and its SSI Professionals are responsible for knowing and adhering to laws/local regulations). This form is used for SSI Explorers programs and Explorers specialty experiences. This is a legal contract terminating your rights to file a lawsuit. Read carefully before signing. Warning – SSI Explorers programs use life-support equipment and techniques that have inherent risks that may cause injury, illness, or death.

In consideration of being allowed to participate in an SSI Explorers program, I, _____
(print name of participant) expressly agree to be bound by this Agreement and comply with the SSI Explorers Responsible Diver Code. I understand this Agreement is between me, my family, estate, heirs, and/or anyone who may have a claim on my behalf, and _____
(print name of training center), including all instructors, facilities, boats, and dive sites; in addition to Scuba Schools International ("SSI"), and all respective owners, officers, employees, representatives, volunteers, agents, contractors, and any others on their behalves, whether specifically named or not (herein referred to as "Released Parties").

I voluntarily assume all risks of injury, illness, and death, caused by scuba diving, breath-hold diving, and all related activities, whether foreseeable or not, including but not limited to risks associated with; swimming, entering and exiting the water, falling on, being struck by or abandoned by a boat, getting separated or lost underwater, holding my breath, becoming unconscious, pre-existing health conditions, heart failure, overexertion, panic, drowning, pressure-related injuries, decompression illness, environmental and marine life injuries, unknown causes, equipment malfunctions, improper dive planning, or improper action of other divers or support personnel (including failure to rescue, recover, resuscitate, or provide emergency assistance). I understand these risks and voluntarily choose to participate despite the risks.

I agree to waive, release, not sue, discharge, save, indemnify, and hold harmless the Released Parties of all claims, demands, causes of action, lawsuits and damages by me, my estate, family, heirs, or others who may have a claim for my injury, illness, or death as a result of any act or failure to act, including negligence by the Released Parties, associated with my Explorer and all related activities. I agree that it is my responsibility to inform my family and all those who may have legal rights on my behalf that I have entered into this Agreement and it is my intent that they be bound by the Agreement. I agree that me or my estate shall be fully liable for the cost to Released Parties for any claim brought on my behalf arising from my participation in scuba diving and all SSI Explorer program-related activities.

I understand SSI licenses SSI Training Centers, SSI Professionals, and their affiliates to use various SSI trademarks and to conduct SSI training, but I agree they are not agents, employees, or franchisees of SSI, its parent, subsidiary, or affiliated corporations. I further understand that SSI Training Centers, SSI Professionals, and their affiliates' businesses are independent, and are neither owned, operated, or controlled by SSI, and that while SSI establishes standards and materials for SSI training programs, it is not responsible for, nor does it have the right to control, the operation of the business activities or the day-to-day training programs and/or supervision of divers by SSI Training Centers, SSI Professionals, their affiliated businesses, and/or their associates' staff. I further understand and agree on behalf of myself, that in the event of injury, illness or death during dive activities, I shall not hold SSI liable for the actions, inactions or negligence of the SSI Training Center, SSI Professionals, and other affiliated businesses or personnel associates with my dive activities.

I have read this Agreement and the SSI Explorer Responsible Diver Code. I expressly understand my responsibilities and that I am giving up legal rights by signing this Agreement. I understand this is a legal contract and I am voluntarily signing it without inducement or duress. I understand this is an unconditional and complete release of all liability to the greatest extent allowed by law. If any portion of this Agreement is found to be legally unenforceable, that portion shall be severed, and the remainder shall have full legal force. I agree to be bound by this Agreement without modification of the preprinted text. I have acquired the written consent of my parent or guardian to engage in this Agreement by completing the SSI Youth Addendum form.

Participant's Name (Print)

Participant's Signature

Date (DD/MM/YY)

Parent/Guardian (Print)

Parent/Guardian Signature

Date (DD/MM/YY)