

## Solo Diving Liability Release & Assumption of Risk Agreement

## THIS IS A RELEASE OF YOUR RIGHTS TO SUE! READ IT CAREFULLY. FILL IN ALL BLANKS. INITIAL EACH PARAGRAPH BEFORE SIGNING.

l,, hereby affirm that I have been advised of the inherent hazards of solo scuba diving.
Further, I understand that such diving involves certain inherent risks including, but not limited to, drowning,
decompression sickness, embolism, oxygen toxicity, inert gas narcosis, marine life injuries and other types of barotraum
and/or hyperbaric injuries. I further understand that by diving alone, I may not have a dive buddy to assist me should ar
of these, or any other, diving malady or accident occur while I am solo diving.
l,, understand and agree that, Pennyroyal Scuba or any of their respective employees, officer
agents or assignees, nor the dive vessel, nor the dive operation through which I am granted the privilege of solo diving,
nor my dive buddy, nor other participants in this solo diving activity (hereinafter referred to as Released Parties) may be
held liable or responsible in any way for any injury, death or other damages to me or my family, heirs or assignees that
may occur as a result of my participation in solo diving as a result of the negligence of any party, including the Released
Parties, whether passive or active.
l,, in consideration for being allowed to solo dive, hereby personally assume all risks in
connection with this activity for any harm, injury, or damage that may befall me while I am solo diving, including all risk
connected therewith, whether foreseen or unforeseen, even if caused by the negligence of the Released Parties.
l,, further save and hold harmless the Released Parties from any claim or lawsuit by me, m
family, estate, heirs or assignees arising out of my enrollment and participation in solo diving, including all claims arising
before, during, and after this solo diving activity, even if caused by the negligence of the Released Parties.
l,, further state that I am already a certified diver and have been truthful in stating my
qualifications as a certified scuba diver, and have the following certifications from the following training agencies:
that I am aware of the required certification for solo scuba diving, and that I meet all
requirements. I have been a certified scuba diver since:, and have been diving for: years for a total of:
dives to a maximum depth of: feet/meters (Circle either feet or meters).
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 and will.
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 guardian.

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- 1. PLEASE COPY THE FOLLOWING STATEMENT (IN ITS ENTIRETY) ON THE BLANK LINES PROVIDED BENEATH THIS PARAGRAPH.
- 2. PLEASE SIGN, DATE AND WITNESS THE FORM WHERE INDICATED.

STATEMENT: IT IS MY INTENTION, BY SIGNING THIS INSTRUMENT, TO EXEMPT AND RELEASE THE RELEASED PARTIES FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE ORWRONGFUL DEATH HOWEVER CAUSED, INCLUDING, BUT NOT LIMITED TO, THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE.

		IERE:	
I have fully informed myself of the	contents of this liability release	and express assumption of risk agreement by i	reading it before I
signed it on behalf of myself and m	y heirs. I understand this liabilit	y release and express assumption of risk agree	ement expresses
the complete and whole agreemen	t between me and the Released	Parties as it relates to the issues set forth here	ein.
the complete and whole agreemen	t between me and the Released	Parties as it relates to the issues set forth here	ein.
the complete and whole agreemen	t between me and the Released	Parties as it relates to the issues set forth here	ein.
			ein.
the complete and whole agreemen	nt between me and the Released Date	Parties as it relates to the issues set forth here	ein.  Date
	 Date		
Signature of Diver	Date PSC Staff Com		Date
Signature of Diver  Solo Certification Agency:	Date  PSC Staff Com, Date of Issuance:	Witness plete Below	 Date
Signature of Diver  Solo Certification Agency:  Is dive plan with diver?	Date  PSC Staff Com , Date of Issuance:, Max Planned Depth?	Witness  plete Below	 Date
Signature of Diver  Solo Certification Agency:  Is dive plan with diver?	Date  PSC Staff Com, Date of Issuance: , Max Planned Depth?	Witness           plete Below          /	 Date



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Please use this blank page to write your dive plan out. If multiple dives please indicate each dive by number