

SeaDevil Youth Scuba Annual Club Application Waiver and Release of Liability



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Full Legal Name: _____

(As Written on Your Passport)

Address: _____

SeaDevil is an unincorporated entity which is wholly owned by Dive Connections, Inc. and the names SeaDevil, SeaDevil Divers are Registered Trademarks of Dive Connections, Inc.

Email Address: _____ Date of Birth: _____ T-Shirt Size: _____

Phone (Cell) _____ (Daytime) _____ (Home) _____

Please **attach copies** of the following documents:

Diver Ins. & Travel Assist Card Carrier: _____ Exp Date: _____ Number: _____
[DAN Membership & Insurance](#)

Emergency Contact: _____ Relationship: _____

Phone (Cell) _____ (Daytime) _____ (Home) _____

Address: _____

Physician Name: _____ Phone #: _____

Address: _____

Diver Information: Please remember to bring your card with you whenever and wherever you plan to dive.

If you are a certified diver, how would you rate yourself? (Beginner/Intermediate/Experienced) _____

Scuba Certification Card Agency: _____ Level: _____ Number: _____

of Logged Dives: _____ Date/Location of last Dive: _____

Waiver and Release of Liability:

I, _____, certify that the statements made regarding my experience and physical condition are correct. I understand that if I plan to go scuba diving with this club, my acceptance for membership is predicated on my assurance that I am physically fit to engage in ocean scuba diving and that I fully understand the risks involved and I am prepared to assume such risks. I further agree to hold harmless Dive Connections, Inc. trading as Dive Connections, SeaDevil, SeaDevil Youth Scuba Club and/or SeaDevil Divers and any activity sponsor and any officers, directors, employees, subcontractors, or agents of these entities in the event of any diving or other accident or injury that I may incur during the above listed trip. I further understand that the remoteness of many diving destinations I have chosen to go may preclude immediate access to appropriate medical care and/or recompression therapy. I state candidly and without reservations that I am willing to assume complete responsibility for all risks encountered while participating with this club. My signature or the signature of my parents/legal guardians, if I am under the age of maturity, attests to my understanding and agreement to the above assumptions of risk, and also to the statement of terms and conditions listed on the back of this page which I have read and initialed.

Signed _____ Date: _____

Parents/Guardians (if applicable): We, the parents of the above indicated minor, hereby agree and affirm as guardians on behalf of the aforementioned minor that this Waiver and Release of Liability shall be binding in all of its terms. We further agree that either one of us or our guardian designee listed below shall have our joint and individual permission to travel with the aforementioned minor with respects to any trip the club may undertake even where that travel is beyond to borders of the United States.

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Guardian Designee: _____ Date of Birth: _____

(Continued on Reverse Side)

Dive Connections ♦ SeaDevil ♦ SeaDevil Youth Club

Principles and Policies

Member & Parent/Gaurdian as applicable: Please read and signify your understanding and acceptance by initialling each paragraph and signing below.

(____) SeaDevil Youth is a division of SeaDevil and is a club for young scuba divers and run by its members. Scuba diving is a buddy / group sport and is particularly appropriate for multi-generational participation. Both the youth and at least one parent should be participating members. It is expected that the youth's parent(s) take an active role in helping their child participate within these activities.

(____) Scuba Diving is an activity that involves some risk. Members, parents and children, should be qualified scuba divers, familiar with the risks and procedures. Please refer to and read carefully the following

- [PADI – Standard Safe Diving Practices Statement of Understanding](#),
- [PADI – Youth Diving; Responsibility and Risk Acknowledgement](#),
- [PADI – Youth Responsibility Flip Chart](#) or [Youth Responsibility Video](#),

and all Releases provided with club membership and when signing up for any club activity.

(____) We, the member and parent/guardian, affirm that we have been advised and thoroughly informed that diving is an adventure sport as well as many other activities in which the club may participate with risks to the participant. With respects to diving these risks may include, but are not limited to, pressure related injuries affecting the lungs sinuses and ears, drowning, panic and other serious injury or death. We also understand our responsibilities, as participant child and parent, in participating in scuba and other activities and agree to accept those responsibilities.

(____) We, the member and member parent/guardian, understand and agree it is solely our responsibility to eevaluate whether our child should participate in scuba and other activities. This decision is based upon our knowledge of the mental, phusical and emotional abilities of our child as well as his/her medical history. We understand and agree that it is our responsibility to discuss with a physician any questions we have regarding our childs medical history and participation in these activities. [PADI Diver Medical Statement](#)

(____) Minor children must be accompanied at all events by a parent or guardian or their designee. SeaDevil Members, as most all scuba divers, are keenly interested in safety and are very supportive and helpful to all members of the group. However, they are not surrogate parents and cannot be responsible for children left unsupervised by their parents.

(____) SeaDevil Youth activities will be loosely supervised by volunteer adult members of SeaDevil except that all scuba training activites will have qualified dive professionals directly supervising the specific scuba activities. These professionals may be volunteers or paid, but all will be affiliated with and all training will be conducted under the auspices of Dive Connections.

(____) Member parents and youth recognize and agree to adhere to the following diving limitations for youth divers:

- Divers between ages 12 and 14 inclusive must be buddied with an adult and limit their diving depth to not more that 60 feet.
- Divers ages 10 and 11 must be accompanied by their parent, guardian or dive professional and limit their diving depths to not more that 40 feet.

(____) All SeaDevil Youth participants, adults and youth, must be members of SeaDevil. Single membership dues are currently \$49 per year. The first membership of anyone in a family is registered and charged dues as a single member and subsequent adults and youth in the same family shall have dues assessed at \$30 annually. Dues amounts are subject to change without notice as directed by club leadership.

(____) SeaDevil Youth desires to provide interesting and engaging activities for youth members and their related adults. Some activities will not require any additional payment to participate but other activities will undoubtedly require additional fees. No member is obligated to participate but is obligated to remit the associated fee should they choose to participate.

(____) All SeaDevil Youth members, both adult and youth shall carry insurance for hyperbaric treatment and medical evacuation. Divers Alert Network is preferred provider, but any such coverage is acceptable. [DAN Membership & Insurance](#)

I, _____, recognize and agree to each and all of the principles and policies presented herein and choose to be bound by them. I hereby agree to release and waive all my rights to pursue damages against Dive Connections, SeaDevil, SeaDevil Youth, their owners, directors, officers, managers, employees, staff, contractors, club members, volunteers and any other of their associates or agents and to indemnify and hold each and all of them harmless for any injury or loss I may suffer whatever the cause as a result of my participation in this group and its activities.

Member: Print Name: _____ Signature: _____ Date: _____

(If member is under age 18)

Parent or Guardian: Print Name: _____ Signature: _____ Date: _____