

# Aquatic Center of Rochester, Inc.

## Try Diving Pool Event

### REGISTRATION INFORMATION – Please print

Name (First, Last) \_\_\_\_\_ DOB: (dy/mo/year) \_\_\_\_\_

Address \_\_\_\_\_ Gender  Male  Female

\_\_\_\_\_ email: \_\_\_\_\_

City, State/Province, Country, Zip/Postal Code  
\_\_\_\_\_

Phone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

#### Emergency Contact Information

Name/Relationship \_\_\_\_\_ Phone \_\_\_\_\_

### RELEASE OF LIABILITY/ASSUMPTION OF RISK/NON-AGENCY ACKNOWLEDGMENT

Please read carefully and fill in all blanks before signing.

#### Non-Agency Disclosure and Acknowledgment Agreement

I understand and agree that PADI Members ("Members"), including Aquatic Center of Rochester, Inc. and/or any individual PADI Instructors and Divemasters associated with the program in which I am participating, are licensed to use various PADI Trademarks and to conduct PADI training, but are not agents, employees or franchisees of PADI Americas, Inc., or its parent, subsidiary and affiliated corporations ("PADI"). I further understand that Member business activities are independent, and are neither owned nor operated by PADI, and that while PADI establishes the standards for PADI diver training programs, it is not responsible for, nor does it have the right to control, the operation of the Members' business activities and the day-to-day conduct of PADI programs and supervision of divers by the Members or their associated staff. I further understand and agree on behalf of myself, my heirs and my estate that in the event of an injury or death during this activity, neither I nor my estate shall seek to hold PADI liable for the actions, inactions or negligence of Aquatic Center of Rochester, Inc. and/or the instructors and divemasters associated with the activity.

#### Liability Release and Assumption of Risk Agreement

I (participant name), \_\_\_\_\_, hereby affirm that I am aware that skin and scuba diving have inherent risks that may result in serious injury or death.

I understand that diving with compressed air involves certain inherent risks; decompression sickness, embolism or other hyperbaric injury can occur that requires treatment in a recompression chamber. I further understand that this program may be conducted at a site that is remote, either by time or distance or both, from such a recompression chamber. I still choose to proceed with this program in spite of the absence of a recompression chamber in proximity to the dive site.

I understand and agree that neither the dive professionals conducting this program, nor the facility through which this activity is conducted, Aquatic Center of Rochester, Inc., nor any of their respective employees, officers, agents or assigns, nor PADI (hereinafter referred to as "Released Parties") may be held liable or responsible in any way for any injury, death or other damages to me, my family, estate, heirs or assigns that may occur as a result of my participation in this program or as a result of the negligence of any party, including the Released Parties, whether passive or active.

(continued on reverse)

