Name:	Birth Date	: / / Age: Sex:
Address:	City:	State: Zip:
Phone:	E-mail:	Nationality:
Hotel / Ship:	Room / Cabin: [Dates of Occupancy
Certifying Agency:	C. Card Number:	Highest Cert. Level:
Emergency Contact:	Relationship:	Phone:
	TY RELEASE AND EXPRESS ASS FILL IN ALL BLANKS, AND INITIA	
azards of skin and scuba diving or the o	hereby affirm that I have been other water activities in which I am voluntarily choos	well advised and thoroughly informed of the inherencing to participate.
an occur that require treatment in a reco conducted at a site that is remote, either	ompression chamber, I further understand that the div by time or distance or both, from such a recompression	isks; decompression sickness, embolism, or other injurie ving activities in which I will be participating may be on chamber. I still choose to proceed with these dives in ation in scuba diving can be dangerous and result in death.
espective employees, dive masters, inst able or responsible in any way for any ir	ructors, agents or assigns (hereby referred to as "Rel njury, death, or other damages to me, my family, he water related activity (here after included with the ter	de C.V. and/or Alex Adventures Cozumel, Nor any of their leased parties") or anyone working with them, may be held irs or assigns that may occur as a result of my participating m "diving activities") or as a result of the negligence of any
		personally assume all risks in connection with said diving activities, including all risks connected therewith, whether
	_	any claim or lawsuit by me, my family estate, heirs, or
I hereby agree that any claim I	n these diving activities including both claims arising I may have against Step Up Diving Enterprise and/ or the date of the incident or occurrence giving rise t	or Alex Adventures Cozumel or the Released Parties will b
	prought by me against the Released Parties arising frion of the state of Quintana Roo, Mexico and shall not	rom my participation in these diving activities may only be the brought elsewhere.
		ities and that I will be exerting myself during said diving hat I will not hold the above listed individuals or companies $\frac{1}{2}$
$\underline{}$ I further state that I am of onsent of my parent of guardian.	lawful age and legally competent to sign this	liability release or that I have acquired the written
I understand that the terms here	in are contractual and not a mere recital, and that I ha	ve signed this document of my own free act.
nd/or Alex Adventures Cozumel, a	ind all related entitles as defined above, from all liab	o exempt and release Step Up Diving Enterprise bility or responsibility whatsoever for personal injury, gence of the Released Parties whether passive or active.
have fully informed myself of the nitialized it on behalf of my heirs as		assumption of risk by reading it before I signed and
DIVER'S SIGNATURE:		

Signature of parent or guardian if under 18 year old

"Step Up Diving Enterprise/ Alex Adventures Cozumel Safe Diving Code"

Maintain good mental and physical fitness. Do not dive under the influence of alcohol or drugs. Know your limits as a diver.

Keep proficient in diving skills. Always review them in controlled conditions after periods of inactivity. (Beach dive before boat diving).

Be familiar with dive sites, if not, obtain a formal diving orientation. Engage in diving activities consistent with your training.

Use complete, well-maintained diving equipment. Inspect it for fit and function prior to every dive. DENY the use of your equipment to uncertified divers.

Always use a buoyancy control device, bottom timer & depth gauge, submersible pressure gauge and regularly monitor them during the dive.

Listen carefully to dive briefings, follow all directions, respect the advice of those coordinating your diving activities, DO Not Pass the Diversater.

Adhere to the buddy system throughout every dive and **REGULARLY MONITOR YOUR AIR SUPPLY DURING EVERY DIVE.**

Be proficient in dive-table usage. Make all dives NO-DECOMPRESSION dives and allow a margin of safety, have a means to monitor depth and time and air supply under water. Return onto the boat with at least 500 psi of air remaining in your tank

Make safety stops on all dives.

Maintain proper buoyancy. Maintain neutral buoyancy under water. Have weights clear for easy removal. Establish positive buoyancy when in distress.

Always breathe properly while diving. Never hold your breath while using compressed air.

Signature of parent or guardian if under 18 year old

Always ascend slowly at a rate of not more than 30 feet per minute.

The Maximum depth limit on a dive boat is not to exceed 90 feet unless directed and briefed differently by the divemaster or Instructor of your group Absolutely no fish, coral or shell collecting while diving off the boats or offshore.

EACH DIVER IS RESPONSIBLE FOR MONITORING HIS OR HER OWN AIR, DEPTH, AND BOTTOM TIMES AS WELL AS CALCULATING REPETITIVE DIVES!

BeginnerIntermediate Advanced Diver Rescue Diver Other Please List:
I have loggeddives since certification. My last dive was (date) / / . Location:
I declare I have dived to depth of feet. Are you using a dive computer (circle)? Yes No Brand & Model
Please list any and all medications (prescriptions and non-prescriptions) you are presently taking:
Do you have a history of or suffer from any form of heart disease? Yes No
Do you suffer from any medical conditions that would limit or prohibit your diving activities? Yes No If yes, please explain as follows:
Do you have DAN diving Insurance? Yes No Policy #:
If you do not have scuba diving insurance Step Up Diving Enterprise and/or Alex Adventures Cozumel strongly recommends that you purchase scuba diving insurance!
Would you like to purchase DAN dive insurance for an annual fee of \$89 USD? Yes No
I HAVE READ AND UNDERSTAND THE SAFE DIVING CODES DISCRIBED ABOVE:
DIVER'S SIGNATURE: DATE:

DATE: