

Youth Diving: Responsibility and Risks Acknowledgment

(Please read carefully, fill in all blanks, and sig	gn and date below.)	
I/we,,	and my/our child,	
have viewed and understand the Youth Diving have been advised and thoroughly informed to participant. These risks may include, but are a sinuses and ears, drowning, panic and other sties, as parent and participant (child), in partices responsibilities.	g: Responsibility and Risks video or flip chart. hat diving is an adventure sport with inheren not limited to, pressure related injuries affect serious injury or death. We also understand o	t risks to the ing the lungs, ur responsibili-
As the parent/guardian of the minor child, I/w evaluate whether my/our child should particip knowledge of the mental, physical and emotio I/we understand and agree it is my/our responsed my/our child's medical history and	pate in scuba activities. Our decision is base onal abilities of our child, as well as his/her mails insibility to discuss with a physician any quest	d upon our edical history.
I/we understand and agree that it is my/our reof my/our child to determine whether he/she the program.	-	
I/we agree to abide by all supervisory and dep certification.	oth limitations that may accompany my/our o	hild's PADI
I/we understand that PADI certifies instructors oped by PADI.	s/dive centers and provides materials for pro	grams devel-
I/we understand that the dive center/resort arvision of this activity	nd the instructor are responsible for the cond	luct and super-
I/we understand my responsibilities and those and Risk video or flip chart.	e of my child as set forth in the Youth Diving I	Responsibilities
I/we have read this Acknowledgment, underst and agree that this Acknowledgment is a bind facility and PADI.	9	
Parent/Guardian Name	Parent/Guardian Signature	(Day/Month/Year)
Participant/Minor Name	Participant/Minor Signature	(Day/Month/Year)