

**LOCH LOW-MINN STATEMENT OF UNDERSTANDING LIABILITY RELEASE AND
WAIVER OF STUDENT DIVER ATTENDING CLASSES FOR DIVING CERTIFICATION**

STUDENT'S NAME: _____ **DOB:** _____

ADDRESS: _____

EMAIL: _____ **PHONE:** _____

CERTIFICATION AGENCY / DIVE SHOP: _____

INSTRUCTOR NAME: _____

REPRESENTATIONS

I, _____, the above identified student, attending classes to obtain a valid _____ Certification in scuba diving issued by the following Agency / Dive Shop: _____, under the aforementioned, a duly licensed instructor trained in safe diving practices for the aforementioned agency. I do hereby affirm and acknowledge the inherent hazards and risks associated with scuba diving and/or snorkeling and/or swimming. I fully understand that these risks can lead to severe injury and even death. I make the following representation to the employees and agents of LOCH LOW-MINN, LLC., a Tennessee company operating a scuba diving resort at 116 County Rd. 420, Athens, McMinn county, Tennessee 37303, in order to obtain permission from the said corporation to actually either engage in scuba diving or obtain an air tank fill at the said resort or both, without which representation the corporation would not permit me to either engage in scuba diving or obtain an air tank fill at their resort:

I understand that scuba diving and skin diving, like other sports, often require strenuous exercise, but that unlike many land sports in the case of diving, the diver is not in a natural terrestrial environment. There are many things that make scuba diving different from other activities, including swimming, and I understand those differences and inherent problems that exist in the practice of scuba diving. As part of my training, I understand that I should have a doctor's certificate approving my medical aptitude for diving. I have been cautioned and understand the reasons behind certain important rules as they relate to both skin and scuba diving. It has been stressed to me that I must never dive alone and that I must always respect the safety precaution of having and being a buddy even in shallow water. I understand that certain basic safety equipment is always a must when diving and that this includes a buoyancy compensator. I understand and know why a scuba diver breathing compressed air must never hold their breath and realize that if a diver was ascending from depth and holding their breath while breathing compressed air that the air would expand and that the expansion could rupture the delicate **ALVEOLI** in the dive's lungs. I understand the danger of carbon dioxide buildup, which could lead to unconsciousness if I hold my breath underwater or breathe irregularly.

OVER PLEASE

I understand the danger of hyperventilation and the risk of blackening-out when the desire to breathe is suppressed and the oxygen used up. I also understand why I must equalize the pressure in my ears and sinus to prevent injury to my ear drum and injury to my sinus membranes.

I also understand the need to respect the dive tables and have been taught to use dive tables, limiting my dives to no decompression dives to avoid the danger of decompression sickness or the bends.

I HERBY REPRESENT TO LOCH LOW-MINN, LLC. THAT I SHALL NOT ENGAGE IN ANY DIVE OR DIVES ON THE PROPERTY OF THE SAID LLC THAT PERSUANT TO THE U.S NAVY DIVE TABLES WOULD REQUIRE DECOMPRESSION.

I further represent and acknowledge that at any and all times that I am on the property of LOCH LOW-MINN, LLC., whether I am engaged in actual classes or actually diving or not, that I shall be under the custody and control of my aforementioned licensed scuba instructor, and that neither LOCH LOW-MINN, LLC., its employees or agents, nor the record title owners of the premises shall have any duties or rights to control my activities or actions whatsoever. I agree and promise to conduct myself at all times while on the premises in accordance with the direction and control of my licensed scuba instructor, whether in or out of the water.

WAIVER AND ASSUMPTION OF RISK

I, _____, hereby, for both my benefit and for my family, next of kin, and heirs at law, hereby voluntarily release, discharge, waive, and relinquish any and all actions or causes of actions for personal injury, property damage or wrongful death occurring to me or my property and arising from being on the premises and/or the engaging in either skin or scuba diving on the premises of the diving resort operated by LOCH LOW-MINN, LLC., no matter the proximate cause of such personal injury, property damage or wrongful death and I, for myself, my family, next of kin, heirs at law, executors and administrators, assume the risk of scuba diving on these resort premises and waive and release LOCH LOW-MINN, LLC., all its employees and agents and the record title owners of the resort real property from any and all claims or demands whatsoever, either in law or in equity, which I, my family, my next of kin, my heirs at law, executors or administrators may have by reason of any matter or cause in connection with either being on the premises or engaging in scuba or skin diving on said resort property.

IN WITNESS WHEREOF, I have signed this legal document on this the _____ day

of _____ “ _____ ”

INSTRUCTOR:

STUDENT

WITNESSED BY