Hartley's Under Sea Adventures Ltd

P.O. Box SB 194 Somerset Bridge, Sandys SB-BX Bermuda

Report your condition in the box below, complete with details, diagnoses, treatments and time lines, if you:

- 1. Suffer from seizures, convulsions, blackouts or fainting, or take preventative medication.
- 2. Have had, take medication to control, or now have **any** form of heart disease, or circulatory problems, which includes high blood pressure.
- 3. Have asthma or any breathing impairment including chronic obstructive pulmonary disease.

Include in the space below any on going health issues with your ears, sinuses or problems with balance. Also mention other conditions relevant to a safe and enjoyable dive: a cold, sinusitis, problems clearing ears on airplanes or mountain travel, can't kneel, fear of fish, being very scared, near drowning experience, claustrophobia or pregnancy. You should also mention these conditions, and any illnesses mentioned above, to your undersea guide at check-in, and pre-dive at the top of the ladder.

I do hereby exempt, absolve and release Hartley's Under Sea Adventures Ltd. (hereinafter Hartley's USA), its employees, agents, insurers, Norwegian Cruise Lines, Meyer Agencies, and all other persons involved (hereinafter Released Parties), from all claims, liability or demands that I, or my representatives, dependants or next of kin may have, for any injury, death, loss or damage suffered by me, or my property, while on the premises, boat of Hartley's USA or while participating in any water or diving activity with Hartley's USA, howsoever caused, whether by act of neglect of the Released Parties, and whether or not said act of neglect results from a breach of statutory duty, carelessness, lack of skill, or negligence of any of the Released Parties. If any of this contract is found to be invalid or incorrect, the rest of the agreement shall still remain in force.

I fully understand that there are risks inherent in going in the water and underwater, with or without a diving helmet and voluntarily consent to these risks. I will listen to and follow instructions. I will not let go of the ladder or take off my helmet and, will leave it in its natural upright position. I have the authority to sign for minors ages 5-18.

My signature verifies that a physician is aware of my medical condition and has cleared me to swim, snorkel or dive in 8-10 feet of water- In writing for conditions 1, 2, or 3. I know I am signing a binding legal contract which relieves me of my right to bring legal action against Hartley's Under Sea Adventures Ltd. and Released Parties for injury, loss or death howsoever caused.

HOME ADDRESS		E-mail		
Street, town, state, country)		Date of dive M	D	Y_
Print Name	Print Name			
ignature	Signature			
Conditions if any	Conditions if any			
rint Name	Print Name			
ignature	Signature			
onditions if any	Conditions if any			