

**DSDC
BSAC
Branch 1339
Dubai U.A.E.**

Liability Release Form

For DSDC -Non Diving Activities including swimming and snorkeling.

Name: _____
Address: _____
Home Phone: _____
Date of Birth: _____
Swimming or Snorkeling Qualifications, if diving any _____:
Year of Qualification: _____

Medical History, which may effect any participation in swimming or snorkelling activities: (any information given here is purely private and confidential):

I, the above named, understand and agree that Desert Sports Diving Club will not be held liable in any way for any occurrence that may result in injury, death or other damages to me or my dependants by my participation in any water sports or other activity with Desert Sports Diving Club.

I declare that my swimming/snorkelling qualifications are those as set out by me above.

I further declare that I am of lawful age to make this statement and understand that I am participating at my own risks.

By this statement I hereby agree and release Desert Sports Diving Club, its officers, its members, its guests, its agents and its suppliers from any and/or all liability whatsoever in relation to any loss whatsoever for personal damage, property damage or wrongful death arising from my participation in any activity with Desert Sports Diving Club

I am competent to make this statement and the history provided above is true to the best of my knowledge, information and belief.

I am not under the influence of any drugs or alcohol at the time making this statement.

I understand that by partaking in activities with DSDC that I may be subjected to, but not limited to, the following risks;

Water Currents including overflows and downflows.

Changing water conditions inclusive of weather affects.

Deep water.

Marine animals and similar including sea snakes, jelly fish, sharks, barracuda, tuna, turtles and dolphins.

Rocky outcrops inclusive of sharp shells, urchins and other marine creatures.

Other people;

Adults and Children entering and exiting the water from boats.

Third Parties including fishermen in power boats.

Official Personnel inclusive of the Coastguard.

Signature of Participant / Date
Date

Signatures of Parents or Guardians /
(where applicable)

Witness / Date

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