Time:	
Trails:	
Group:	

timing device.

WAIVER AND RELEASE OF LIABILITY ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

Rental:	
EAN:	
92's:	

WEST END DIVING & SALVAGE CO., AMERICAN ACADEMY OF UNDERWATER EDUCATION, INC.
WEST END DIVING - BONNE TERRE, INC., DOE RUN RESOURCES

EMAIL ADDRESS:			STREET		PHONE			
I,	, t	he undersigned, of	CITY_	STATE	ZIP	hereby		
request perm	ission to enter Bonne Terre Mine,	Bonne Terre, Missouri	("Mine")	to engage in scuba diving activities in	the underground	waters of the Mine.		
I represent a	and certify that my true age is $_$	years. BIRTHDATE:		_ (If diver is under the age of 18 years,	then diver and i	nis/her		
parents/guard	dian must execute this Release). $oldsymbol{ ilde{L}}$	n case of emergency, no	otify	at phone no	·	·		
PLEASE PLACE	YOUR INITIALS NEXT TO EACH OF THE	FOLLOWING SECTIONS:						
1.	I have been certified as a scuba	diver under the (CERTI)	FYING AG	ENCY) training courses. YEAR C	ERTIFIED	-		
2.	My certification level is	Date of my las	st dive_	My total number of dives are	·			
3.	I understand that diving can be including the possibility that un			ty, and I am aware of the risks and dangmay arise.	ers involved in	diving in the Mine,		
4.	of such equipment. I represent the that I have been properly trained	at I have examined all d in its use. I am fam the owner's manual on	equipme iliar wasp	d working order, and I have been properly ent which I have rented, and find it to be ith the use and operation of the particul ect of the equipment on which I am not fa	e in good working ar equipment I a	order, and certify m renting, and have		
5.		understand that even	though	ain inherent risks, including decompres I follow all the appropriate dive pract responsibility of said injuries.				
6.		ral hours for me to ob	tain aco	e, the Mine is a remote site. The closest class to such recompression chamber. I sti proximity to the Mine.				
7.	I carry adequate private insuranc	e to handle any medical	l proble	ms I may develop in connection with my upo	coming dive at the	ne Mine.		
8.	I certify that I am in good physhealth & safety while scuba divin		h and ha	ave no pre-existing medical condition(s)	which might pre	sent a hazard to my		
9.	I understand that safe practices	for scuba diving includ	de but a	re not limited to the following:				
	(a) I will not scuba dive at	the Mine while under	the infl	luence of alcohol, drugs, and/or any other	controlled subs	tance.		
	(b) I will not dive alone another's diving equipme			have not thoroughly discussed the dive	plan. Each of	us will review one		

- (e) I will not dive in conditions in which I do not feel comfortable or that I believe exceed my physical abilities.
- (f) I will surface with at least 300-500 psi in my air tank and will not stay underwater until my air supply is exhausted.

(c) I will dive with a buoyancy control device that has a power inflation system, a depth gauge, a submersible pressure gauge and a

(d) I will adjust weights to maintain neutral buoyancy with no air in my buoyancy control device at the surface of the water and

(g) I am proficient with the use of a dive table and/or the dive computer with which I am diving.

position weights to keep the quick-release buckle centered and accessible at all times.

injured at the Mine as a result of a heart attack, panic attack, hyperventilation or other injury/illness related to diving, I express assume the risk of said injuries.	
 _ 11. I represent that I am participating on a voluntary basis and that I am not an employee or agent of West End Diving & Salvage Co., West Diving - Bonne Terre, Inc., American Academy of Underwater Education, Inc., and/or Doe Run Resources (the "Releasees").	End
12. In consideration of the opportunity to dive in the Mine, I hereby expressly and with full knowledge, assume all risks incidental to stativities and on behalf of myself, my heirs, personal representatives and estate, do hereby release, waive, discharge, agree not sue and hold harmless Releasees and their respective officers, directors, employees and agents, from any and all liability, costs a expenses in the event I suffer property damage, personal injury or loss of life while diving or preparing to dive in the Mine, wheth caused by, or compounded by or increased by the negligence of Releasees. (a) In consideration of the opportunity to dive in the Mine, I hereby assign to West End Diving & Salvage Co., American Academy	to and her Of
Underwater Education, Inc., West End Diving-Bonne Terre, Inc., and their officers, directors, the copyright for all this pertaining to the aforesaid, published or posted by me on the internet and other electronic media.	ngs
13. By executing this Release, I intend to discharge, waive and relinquish any and all suits, claims, demands and actions or causes of action including but not limited to, any such suits, claims, demands, actions or causes of actions for negligence, product liability, stripliability, premises liability or other faults (but not including reckless or intentional conduct), which I, my heirs, person representatives, assignors or any other person or entity claiming by, through or under me, might otherwise have against the Releasees, their respective officers, directors, employees, insurers, and agents, as a direct or indirect result of any accident or incident in Mine. I agree to not publish any images or comments about Bonne Terre Mine, West End Diving & Salvage Co., American Academy Of Underwate Education, Inc., West End Diving-Bonne Terre, Inc., or their officers, directors, employees and agents without the express written consecution of an officer of aforementioned companies. I agree to hold harmless the aforementioned Corporations, for using images of myself, etc.	nal or the ter
 _ 14. No employee, agent, or other representative of Releasees has made any statement or representation to me which is contrary to	or
inconsistent with the information and statements contained in this Release.	
I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING IT(TYPING YOUR NAME IN THE SIGNATURE FIELD IN THIS .PDF FORM) IN CONSIDERATION FOR THE OPPORTUNITY TO DIVE IN THE MINE.	OR
IN WITNESS WHEREOF, I have executed this Waiver and Release of Liability, Assumption and Risk of Indemnity Agreement.	
Releaser Signature Date Witness Signature	
As parent/guardian, I am signing this Release on behalf of my minor child/ward and agree to be specifically bound by all of the terms a conditions of the Release.	ìnd
Releaser Signature Date Releaser Printed Name Witness Signature	
<u>WARNING</u>	