

LIABILITY RELEASE FOR CERTIFIED DIVERS

PLEASE READ CAREFULLY BEFORE SIGNING.

This is a release of your rights to sue SHULAMIT'S EILAT DIVING ADVENTURES (Facility operator) and Shulamit Koretz (Owner) and their employees for personal injuries or wrongful death that may occur during dive activities or as result of the inherent risks associated with scuba diving.

COVID-19: I state that I have not been infected with or recovered from COVID-19 or that I have a physician's statement that certifies that I am healthy and can return to diving after recovering from COVID-19.

1. I acknowledge that I am a certified scuba diver trained in safe diving practices. I am aware of the risks inherent in this sport and accept these risks, including the risk during boat and car travel to and from the dive site. I am aware of the dangers of breath holding while scuba diving. I will not hold the Released Parties and related entities (such as employees, instructors, certified assistants, boat operators, or diver training agencies) responsible if I am injured doing so.

2. I am in good mental and physical fitness for diving, and I am not under the influence of alcohol, nor am I under the influence of any drugs that are contraindicatory to diving. If I am taking medication, I affirm that I have seen a physician and have approval to dive while under the influence of the medication/drugs. I acknowledge that I am physically fit to scuba dive, and I will not hold the Released Parties responsible if I am injured as a result of heart, lung, ear, or circulatory problems or other illnesses that occur while diving.

3. I am aware that I will be diving with a buddy, and it will be our responsibility to plan our dive allowing for our diving limitations and the prevailing water conditions. I will not hold the Released Parties responsible for my failure to safely plan my dive. I expressly assume the risk and accept all responsibility to plan my dive and dive my plan.

4. I will inspect all rented or personal equipment prior to the activity and will notify the Released Parties if any of my equipment is not working properly. I will not hold the Released Parties responsible for my failure to inspect my equipment prior to diving.

5. I understand that most of the dive sites during this excursion are located within the area belonging to the Eilat Coral Beach Reserve where the rules of the Nature Reserve apply. I understand that the nature reserves can fine divers for violating those rules. The Nature Reserve is a strict no touch and no take reserve. Even kneeling on or just touching the ocean floor is prohibited.

6. I understand that according to the Israeli Diving Law my diving depth is limited to the depth limit of my diving certification. I also understand that a valid insurance that covers diving injuries is mandatory by law.

7. I understand that even though I follow all of the appropriate dive practices, there is still some risk of my sustaining decompression sickness, embolism or other hyperbaric injuries, and I expressly assume the risk of said injuries.

8. I understand that scuba diving is a physically strenuous activity and that I will be exerting myself during this diving excursion, and that if I am injured as a result of a heart attack, panic, hyperventilation, etc., that I expressly assume the risk of said injuries and that I will not hold Released Parties responsible for the same.

9. I understand that on this open-water diving trip, I will be at a remote site and that there will not be immediate medical care or hyperbaric care available to me, and I expressly assume the risk of diving in such a remote spot.

It is the intention of _____ (Divers Name) by this instrument to exempt and release **Shulamit's Eilat Diving Adventures and Shulamit Koretz (owner), and all dive center employees involved in this program, and all released entities as defined above** from all liability whatsoever for personal injury, property damage, death.

I have fully informed myself of the contents and this assumption of risk and release before I signed it on behalf of myself and my heirs.

Diver's Signature

Parent or Guardian (if applicable)