



D I V E H E A R T . o r g<sup>®</sup>  
Imagine The Possibilities



## DH Paperwork Instructions for Participants

All forms need to be filled out in the name of the participant (not parent or guardian), or if they are not their own guardian, it needs to be in the name of the parent or guardian signing for the participant. For example, Martha Smith (mother) signing for George Smith (participant)

**Adaptive Diver Registry:** Please fill out this form as completely as possible. For areas that do not pertain to you please put N/A so we know that you have reviewed it.

**Diveheart Liability Waiver:** All participants must fill out for each DSE program they are involved in with dates they will attend. Please initial, sign and date where required if you agree to all terms. Contact with Kara.Repsys@diveheart.org with any questions. The Voluntary Privacy Waiver and Medical Information release need to be filled out by the once a year. Please carefully review and sign provided you agree with all terms. We are only sharing information with the instructors and dive team members that you will be diving with. Please initial, sign and date where required if you agree to all terms.

**Diveheart Liability Waiver for Guardians:** If you are a parent of a minor or guardian to a legally incapacitated person please also review, date and sign this additional form.

**Voluntary Privacy Waiver:** Please carefully review and sign provided you agree with all terms. We are only sharing information with the instructors and dive team members that you will be diving with.

**Media Release:** This is so we can promote our programs. Please review and sign if you agree with the terms. If you do not agree, then please return with a note stating that you do not want your photo used.

**Medical Form:** This form needs to be filled out prior to each dive event. Every question needs to be answered with a Yes or No (not checked marked or anything else).

Men DO need to answer the first questions – ALL questions need to be answered.

Sign and date the form (participant & parent/guardian should both sign if applicable) Please print the participant's name legibly at the top of the form.

**Physican Release:** Please fill out all the information at the top (participant).

Have your doctor fill out all information at the bottom portion and indicate if they can or cannot dive.

This form must be filled out yearly and within a year of your dive experience. Diveheart's scuba year runs from September 1 through August 31 and new forms will be required each September.

A new form will be required if your medical status has changed since your last dive.