

# Whale watching waiver of liability



## Company

Byron Bay Dive Centre  
<http://www.byronbaydivecentre.com.au/>

Activity \_\_\_\_\_

Date of activity \_\_\_\_\_

## Instructions

**Please read the entire document and sign if you agree with all the following declarations**

### Whale watching, vessel travel and medical declaration waiver

By signing this document, I acknowledge that its motive is to exempt and release Chelona adventures & research PTY LTD, and their respective affiliates, subsidiaries, owners, employees, agents, and associated personnel. I understand that this release is intended to hold these entities harmless from any and all liabilities that may arise as a consequence

### Assumption of risk:

I acknowledge that participating in a whale watching excursion involves inherent risks, including but not limited to:

- Unpredictable weather conditions
- Seasickness or physical discomfort
- Encounters with marine life
- Potential for injury or death due to accidents

I understand these risks and voluntarily choose to participate in this activity.

### Release of liability:

In consideration of being permitted to participate in this whale watching activity, I, on behalf of myself, my heirs, executors, and administrators, hereby release and discharge Chelona adventures & research PTY LTD, its owners, employees, agents, and affiliates from any and all claims, demands, or causes of action arising out of or in connection with my participation in this activity.

### Medical fitness declaration:

I declare that I am in good health and do not suffer from any condition that could be aggravated by this activity. I agree to inform the company of any medical conditions that may affect my participation.

I declare that I am not pregnant, I do not have spinal injuries or suffer from back problems, and have not had recent surgeries or injuries.

### Indemnity clause:

I agree to indemnify and hold Chelona adventures & research PTY LTD harmless from any loss, liability, damage, or cost arising from my participation in this whale watching excursion.

### Photo and video release:

I grant Chelona adventures & research PTY LTD permission to use my image or video captured during the excursion for promotional purposes.

## Contact details

First name \_\_\_\_\_

Last name \_\_\_\_\_

Email address \_\_\_\_\_

Sign me up for updates and exclusive offers

Signature \_\_\_\_\_ Date of signature \_\_\_\_\_