

HSFS Huinay Scientific Field Station**DIVING APPLICATION AND REGISTRATION****Personal History**

Name (Last)	(First)	Expected Arrival Date
Birthday (Month/Day/Year)	Email Address	Expected Departure Date

Diving Experience

SCUBA Certification Agency / Level Trained		
Depth Certification	Date of Certification	Place of Certification
Number of Dives (Total)	(Last Year)	(Last six Month)
Date of Last Dive	Place of Last Dive	Number of Dives with Drysuit
List of diving schools completed and diving jobs (with date, location and type of work)		

First Aid Card**Medical Diving Examination**

Date	Expiration Date	Please attach copies of these and your scuba certification card.
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Emergency Contact

Name (First, Last)	Relationship
Address / Email	Phone

Consent and Understanding of Risk

The under signed and, in event the undersigned is under eighteen years of age, the undersigned's parents and/or guardians hereby declare:

- (1) that he/she/they are fully aware of the special dangers and risks inherent in diving.
- (2) that all diving activities at the Huinay Scientific Field Station are held on own risk and self-responsibility of the undersigning participant.

Applicant's Signature

Participant	Father / Mother (or guardian of Applicant)
Date	