

Necessary Paperwork

MODULE 5: Necessary Paperwork

- o Human resource documentation.
- o Equipment inventory.
- o BCD maintenance log.
- o Regulator maintenance log.
- o High-pressure cylinders maintenance log and inspection/test documentation.
- o Compressor maintenance log.
- o Clients' check-in form.
- o Beginners vs. certified divers.
- o Minors & persons with special needs.
- o Medical history statement.
- o Liability release.
- o Courses student record file.
- o Participants boat list or shore activities list.
- o Dive log sheet.
- o Emergency plan.
- o Incident/Accident report.

Human resources documentation.**Documentation**

The service provider shall maintain the following documentation on all staff delivering services:

- A) name, address and date of birth;
- B) training/qualification, experience and medical screening;
- C) Duties assigned to the individual staff member.
- D) Military service status for Egyptians, work permit for foreigners.

Necessary Paperwork

The service provider shall have documentary evidence that all staff members hold relevant and current qualifications for their duties. Proof of qualifications shall be made available to the clients upon request.

Equipment inventory.**Equipment Inventory****Suits**

S	Size	Long	Shorty
1	M	10	5
2	L	15	12

Equipment Inventory

Exsamples written in red

Diving Mask & Snorkels

S	Item	Total	Notes
1	Masks	20	
2	Snorkels	25	

Equipment Inventory**Diving Fins**

S	Available	Size	Notes
1	13	37-38	Open
2	10	S-M	Closed

Equipment Inventory**LED WEIGHTS**

S	1 Kg. piece	2 Kg. piece	Total
1	200	100	400 Kg.

Equipment Inventory**WEIGHT BELTS**

S	Size	Available	Notes
1	S	5	
2	M	15	
3	L	10	

Equipment Inventory**Life Jackets**

S	Size	Available	Notes
1	XS	5	
2	S	10	

Equipment Inventory**Diving Computers**

S	DC#	Brand	Available
1	03	Mares	2
2	02	Suunto	1

Necessary Paperwork

BCD maintenance log

Equipment Inventory				
BCD				
S	D.C #	Brand	Size	Date of Last Maintenance
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
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23				
24				
25				
26				
27				
28				
29				
30				

Each BCD has maintenance paper this paper must include:

- Serial
- Dive center serial number
- BCD brand
- BCD size
- Date of last maintenance

Necessary Paperwork

Regulator maintenance log.

Equipment Inventory						
Regulator						
S	D.C #	Serial #	Brand	P. Gauges	D. Gauges	Date of Last Maintenance
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
38						

Each Regulator has maintenance paper this paper must include:

- Serial
- Dive center serial number
- Brand
- P.Gauges
- Depth Gauges
- Date of last maintenance

Necessary Paperwork

Compressor maintenance log

Each Compressor maintenance must be logged in private book, include:

- Compressor brand and model
- Compressor serial number
- Compressor last air lab test
- Regular filter and oil changes according to manual
- Log book include: (date, cylinder fill, hour working, technician name)

Clients' check-in form

DIVER'S REGISTRATION AND LIABILITY FORM

NAME:		PHONE:		GROUP NAME:	
HOME ADDRESS:				DEPT DATE:	
CITY:		STATE:		ROOM #:	
CITY:		STATE:		ZIP CODE:	
COUNTRY:			EMAIL:		
BIRTH DATE:			DIVING WITH: AIR / NITROX / CUSTOM GASSES (please circle)		
CERTIFICATION AGENCY:			CERTIFICATION NUMBER:		
HIGHEST CERTIFICATION LEVEL:			DATE OF LAST DIVE:		
EMERGENCY CONTACT:			RELATIONSHIP:		PHONE:

Check-in form is one of the important papers in diving operation client or guest date is one of the contact data for any farther contact or promoting.

Check-in form must include:

- Client or guest name
- Arrival & departure date
- Hotel & room number
- Administration papers "if applicable"
- Level of certification and organization
- Number of dives
- Date of last dive
- Nationality

Necessary Paperwork

Beginners vs. certified divers

Beginner:

- At the beginning of the program the participant must review, complete and sign a **medical form** and a **liability release form**.
- In case of any health contraindication, a written clearance to dive from a physician (as a prerequisite to in-water activities) is required.

Intro diver (non- certified): must singe administration papers before start diving activity:

- Medical statement
- Liability release
- Entry level Course: (start one of the certified diving levels): must singe administration papers before start diving activity:
- Medical statement
- Liability Release
- Safety of diving
- Requirement student file

Certified Divers:

Person who is holding diving certification from Organization.

It is highly recommended that certified divers sign administration papers before start the diving activity this paper is:

- Medical statement
- Liability release
- Safety of diving

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Beginners who do not have any info about medical conditions and undertaken risk, have to be informed of such risk while certified divers already have the level of certification which is a proof that they are aware of this info.

Minors & persons with special needs

Minors

In the case of service provision to minors or vulnerable persons, providers shall be aware of the additional responsibilities this entails. The service provider shall implement policies and procedures designed to provide reasonable protection and precautions against abuse occurring during the service provider's activities.

Documented parental or legal guardian consent shall be obtained when the client is a minor.

NOTE the age of a minor is defined by local legislation.

Persons with special needs:

Additional equipment requirements

- Medical clearance from Doctor
- Assistant
- Easy dive site
- Reduce the ratio

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Medical history statement

DIVE SAFETY

Diving Medical History Form

APPENDIX 3

To Be Completed By Applicant-Diver

Name		Sex	Age	Weight	Height
Sponsor (Department / Project / Program / School / etc.)		Date (Month / Day / Year)			

TO THE APPLICANT

SCUBA diving and snorkeling places considerable physical and mental demands on the diver. Certain medical and physical requirements must be met before beginning a diving or training program. Your accurate answers to the questions are more important, in many instances, in determining your fitness to dive than what the physician may see, hear or feel as part of the diving medical certification procedure.

This form shall be kept confidential by the examining physician. If you believe any question amounts to invasion of your privacy, you may elect to omit an answer, provided that you shall subsequently discuss that matter with your own physician who must then indicate, in writing, that you have done so and that no health hazard exists.

Should your answers indicate a condition, which might make diving hazardous, you will be asked to review the matter with your physician. In such instances, their written authorization will be required in order for further consideration to be given to your application. If your physician concludes that diving would involve undue risk for you, remember that they are concerned only with your well-being and safety.

YES	NO	Please indicate whether or not the following apply to you	Comments
<input type="radio"/>	<input type="radio"/>	Convulsions, seizures, or epilepsy	
<input type="radio"/>	<input type="radio"/>	Fainting spells or dizziness	
<input type="radio"/>	<input type="radio"/>	Been addicted to drugs	
<input type="radio"/>	<input type="radio"/>	Diabetes	
<input type="radio"/>	<input type="radio"/>	Motion sickness or sea/air sickness	
<input type="radio"/>	<input type="radio"/>	Claustrophobia	

Necessary Paperwork

Liability release**LIABILITY RELEASE AND ASSUMPTION OF RISK**

I, _____, (*name*) understand and agree that neither my buddy dive guide(s), divemaster or instructors, or other staff; Buddy Dive Watersport B.V.; Padi Americas, inc., or other certifying agencies, or any of their respective employees, officers or agents; or travel partners (hereinafter referred to as released parties), may be held liable or responsible in any way for any injury, death or other damages to me or my family, estate, heirs or assigns that may occur as a result of my participation in this scuba diving or as a result of the negligence of any party, including the released parties, whether passive or active. I further agree that any and all suits or claims against the released parties will be disputed only in the Dutch Caribbean, Bonaire, accepting the rules, laws and regulations of the Dutch Caribbean Bonaire. No complaints, suits or demands will be filed in any other country regardless of the client's country of origin or address. I accept the rules and the courts of the local government of the Dutch Caribbean Bonaire for all disputes of any kind.

**** signature of acceptance of above statement**

date: _____

I, _____, (name) further understand that diving with compressed, and any mixture of oxygen and nitrogen (nitrox), air involves certain inherent risks. Decompression sickness, embolism, or hyperbaric injuries can occur that require treatment in a recompression chamber. I still choose to participate in scuba diving activities.

In consideration of being allowed to participate in scuba diving activities, I hereby personally assume all risk in connection with scuba diving, for any harm, injury or damage that may befall me while I am participating in scuba diving, including all risks connected therewith, whether foreseen or unforeseen.

Signify your agreement with the following statements with your initials

____ I further hold harmless released parties from any claim or lawsuit by me, my family, estate, heirs, or assigns, arising out of my participation in scuba diving activities, including both claims arising during scuba diving and after participating.

____ I also understand that scuba diving is a strenuous activity and that I will be exerting myself while scuba diving, and if I am injured as a result of heart attack, panic, hyperventilation, etc. That I expressly assume the risk of said injuries and that I will not hold the released parties responsible for same.

____ I further state that I am of lawful age and legally competent to sign this liability release or that I have acquired the written consent of my parent or legal guardian.

____ I understand that the terms herein are contractual and not a mere recital, and that I have signed this document of my own free act.

I _____, (name) by this instrument do exempt and release any and all related entities as defined above, from all liability or responsibility whatsoever. I have fully informed myself of the contents of this liability release and express assumption of risk by reading it before I signed it on behalf of myself and my heirs.

Signature of participant _____

Signature of legal guardian _____



Necessary Paperwork

Courses student record file

Record keeping

The service provider shall ensure that appropriate student records are maintained as follows:

- a) Name, address and date of birth of the client;
- c) Any previous training/qualification and experience required for the envisaged activity;
- d) Records of checking the competence of clients;
- e) The progress of the student during a course.

The service provider shall ensure that student records of training and qualifications are kept for at least 7 years.

Student Name _____ Birth Date _____
Day/Month/Year

Mailing address _____ Sex M F

City _____ State/Province _____

Country _____ Zip/Postal Code _____

Phone Home (____) _____ Business (____) _____

Fax (____) _____ Email _____

All PADI Instructors who Initial this document must complete an identification section below.

PADI Instructor _____ Signature _____
 PADI No. _____ Dive Center/Resort No. _____ Date _____
Day/Month/Year

Phone Home (____) _____ Fax (____) _____

Email _____

PADI Instructor _____ Signature _____
 PADI No. _____ Dive Center/Resort No. _____ Date _____
Day/Month/Year

Phone Home (____) _____ Fax (____) _____

Email _____

Note: Attach additional sheet for other PADI Instructor information if necessary.

When referring a PADI Scuba Diver/Open Water Diver student:

- a. Fill in the diver and PADI Instructor information and note appropriate areas of training completed.
- b. Attach a copy of the diver's PADI Medical Statement to this form.
- c. Advise the diver of the need for a photo for certification card processing.
- d. Encourage the diver to complete training as soon as possible and explain that this form is only valid for one year from the last training section completion date.

A. Confined Water Dives

Date Completed Day / Month / Year	Instructor** Initials	PADI #	Date Completed Day / Month / Year	Instructor** Initials	PADI#
CW 1* ____/____/____	_____	# _____	CW 4 ____/____/____	_____	# _____
CW 2 ____/____/____	_____	# _____	CW 5 ____/____/____	_____	# _____
CW 3 ____/____/____	_____	# _____			

*OSD with all CW Dive 1 skills - Open Water Diver CW Dive 1

Waterskills Assessment

Date Completed Day / Month / Year	Instructor** Initials	PADI #	Date Completed Day / Month / Year	Instructor** Initials	PADI #
200 metroyard Swim OR 300 metroyard Mask/Snorkel/Fin Swim ____/____/____	_____	# _____	Skin Diving Skills ____/____/____	_____	# _____
10 Minute Survival Float* ____/____/____	_____	# _____	Dry Suit Orientation ____/____/____	_____	# _____

Dive Flexible Skills

Equipment Preparation and Care* ____/____/____	_____	# _____
Disconnect Low Pressure Inflator Hose* ____/____/____	_____	# _____
Loose Cylinder Band ____/____/____	_____	# _____
Weight System Removal and Replacement (surface)* ____/____/____	_____	# _____
Emergency Weight Drop (or In OW)* ____/____/____	_____	# _____

(Note: If all Confined Water Dives and Waterskills Assessment have been completed by one instructor, only one signature required.)

All Confined Water Dives listed above and the Waterskills Assessment have been completed.

Instructor Signature _____
 PADI # _____ Date ____/____/____

**I certify that this student has satisfactorily completed this skill/section/dive as outlined in the PADI Instructor Manual. I am a PADI Instructor renewed in Teaching status for the current year.

Necessary Paperwork

Example of Participants boat list or shore activities list

Boat Name				Boat Master			
Date				Guide :1			
Destination				Guide:2			
Skipper				Guide:3			
Mobile No.				Camera			

Crew 1:		Crew 2			Crew 3				
N	NAME (FIRST & LAST)	ROOM	HOTEL	NATION.	ACTIVITY	PASSPORT / ID #		NOTES	
1	John Smith			UK	Intro				
2	Sarah Colins			GERMAN	D.Diving				
3					Snorkel				
4									
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Necessary Paperwork

Boat list should include:

- Diving Center name & logo
- Date
- Boat Name
- Hotel & room number
- Guest name & Family Name
- Box number
- Certificate & diving experience
- Activity
- First Dive (depth & Time)
- Second Dive (depth & time)
- Extra dive (depth & time)
- Guest signature
- Next Day Diving
- Notes
- Number of (guest, tanks, boxes & Weights)
- Medical Box & Spare Box
- Pressure of oxygen Tank



Necessary Paperwork

Dive log sheet

Dive Log Sheet

Date: Dive Guide 1:

Boat Name: Dive Guide 2:

Dive Guide 3:

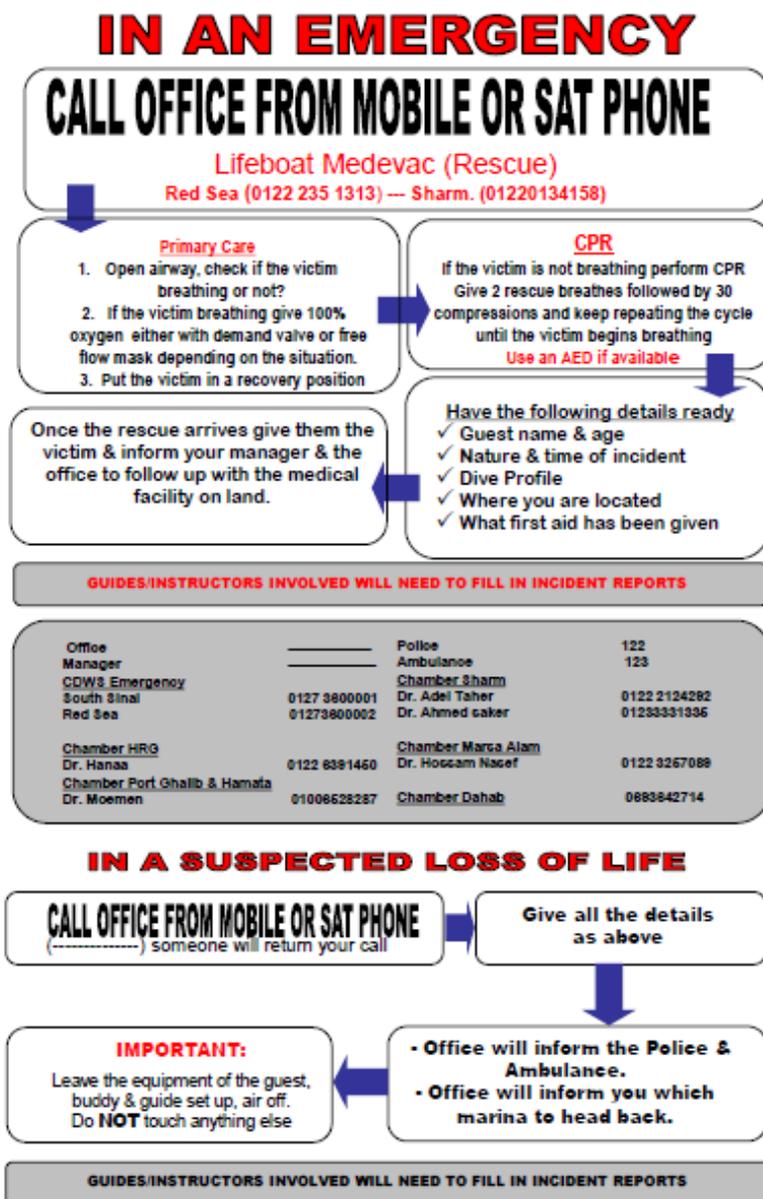
Dive 1: Dive 2: Dive 3:

S	Name	First Dive			Second Dive			Third Dive			Dive guide	Signature
		Air out	Depth	Time	Air out	Depth	Time	Air out	Depth	Time		
1												
2												
3												
4												
5												
6												
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20												

..... Oxygen Check: ----- Bar MFA Box Check:--
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Log sheet: is kind of reference guest activity & dives including (site name, depth & time)

Necessary Paperwork

Emergency plan

Plan for the procedures which must get taken in case of accident, this plan must include:

- Roll call
- Evacuation plan
- Start with EFR
- Phone number of rescue boat
- Phone number diving center
- Phone number of hyper chamber or Nearest Hospital
- Emergency accident report
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Necessary Paperwork

Incident/Accident report

What is the different between accident and incident?

- Indicate 'a happening or an event that takes place and which attracts the attention of people'. As a matter of fact, an incident does not involve the loss of human life or any casualty.

- Accident is used to express 'a happening or an event that takes place all of a sudden'. Unlike an incident, an accident usually involves the loss of human life or casualty.

Necessary Paperwork

**Incident Report****تقرير حادث**

	نوع الحادث Classification of Incident
	موقع الحادث Location Dive Site
	تاريخ الحادث Date
	توقيت الحادث Time

Involved Party Information**بيانات الحالة**

	الإسم Name
	الجنسية Nationality
	تاريخ الميلاد Date of Birth
	جواز السفر Passport #
	رخصة الغوص Diving Certification
	شهادة إخلاء المسؤولية Liability Release
	الحالة Condition

Information of DC/Vessel**بيانات خاصة بالمركز / العائمة**

	إسم المركز DC Name
	شهادة وزارة السياحة MOT License
	إسم العائمة Vessel Name
	تاريخ بداية الرحلة Departure Date
	عدد الركاب المسموح به Diving Certification
	الترخيص الملاحي # of allowed Passengers
	معدات الإسعافات الأولية MFA

بيانات خاصة بمرشد الغوص المرافق للرحلة

	الإسم Name
	الجنسية Nationality
	تاريخ الميلاد Date of Birth
	شهادة الغوص Certification Level

Necessary Paperwork

Information of the Diving Equipment**بيانات خاصة بمعدات الغوص**

العمق Depth:

Description of Incident**وصف الحادث****First Aid Given & Response****الإسعافات الأولية المُقدمة ونتائجها:-****Witnesses****بيانات خاصة بالشهود**

		نوع الحادث Classification of Incident
		موقع الحادث Location Dive Site

Incident Report**بيانات خاصة بمعد التقرير**

	الإسم Name
	الصفة Involvement In Incident

أقر أنا المُوقع علي أن هذا أن البيانات الواردة بهذا التقرير مطابقة للواقع وهذا لإقرار مني بذلك.

I hereby that the information in the above report is truthful.

Signature

التوقيع

Date / / 200

التاريخ / / 200