

# SEAL SWIM INDEMNITY FORM

**Arrival Time:** 1:45 2:00 2:15  
**Seal Swim Time:** 2:00 2:15 2:30

**Wetsuit:** Yes / No

Why not record your seal swim experience on video?

**Purchase Price:** \$52.00

I, \_\_\_\_\_ of \_\_\_\_\_  
(FULL NAME) (ADDRESS) (POSTCODE)

**HEREBY AGREE TO INDEMNIFY** and at all time hereafter keep indemnified:-

UnderWater World Sunshine Coast Pty Limited trading as UnderWater World, Mooloolaba, their officers, servants and/or agents and each of them against all actions, suits, claims and demands (including costs) whatsoever or howsoever arising, whether directly or indirectly, of any injury, loss and/or damage which may be suffered by me whilst I and persons accompanying me on the

\_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_\_

- (a) attending UnderWater World, Mooloolaba, and
- (b) involved in swimming at UnderWater World, Mooloolaba

notwithstanding that such injury, loss and/or damage is in any way whatsoever due to any act or omission by UnderWater World Sunshine Coast Pty Limited trading as UnderWater World, Mooloolaba and/or any of its officers, servants and/or agents.

AND FURTHER I hereby agree to indemnify at all times keep indemnified UnderWater World Sunshine Coast Pty Limited trading as UnderWater World, Mooloolaba for any property damages which I may cause of whatever nature or howsoever caused whilst I am:-

- (a) attending UnderWater World, Mooloolaba, and
- (b) involved in swimming at UnderWater World, Mooloolaba

1. AND I KNOWLEDGE that when swimming at UnderWater World, Mooloolaba I will be swimming in a tank in which seals will be present AND I DECLARE that I do so entirely at my own risk.

I FURTHER DECLARE that I am of good health and am a competent swimmer.

2. AND I ACKNOWLEDGE that when swimming at UnderWater World, Mooloolaba my son/daughter ..... Date of Birth ..... will be swimming in a tank in which seals will be present AND I DECLARE that I, ..... Parent/Guardian that my son/daughter do so entirely at their own risk.

I FURTHER DECLARE that my son/daughter ..... is of good health and is a competent swimmer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness – UWW FOH

\_\_\_\_\_  
Checked by UWW Dive Supervisor

By signing this document, you agree to us collecting and using your personal information. We will use your information to supply to our insurance broker, underwriters and assessors. Where necessary, we may transfer your personal information between our associated companies and businesses. We will not disclose your personal information to any other third party without your consent unless required by law. If you have any questions about how we will use the information that you provide us, or wish to amend your details, please contact us in writing at Oceanis Australia Pty Ltd, PO Box 511, Mooloolaba, Q4557 or facsimile +61 7 54440293 or email [privacyofficer@underwaterworld.com.au](mailto:privacyofficer@underwaterworld.com.au).