

2021-2022 PROFESSIONAL LIABILITY Retailer/Resort Group Professional Liability Policy Exclusively for Dive Pros Affiliated with PADI Retailer and Resort Members

POLICY PERIOD
12:01 a.m. June 30, 2021 through
12:01 a.m. June 30, 2022

IMPORTANT: To maintain continuous coverage from June 30, 2021 – applications with proper payment must be received at Vicencia & Buckley, a division of HUB International, by June 30, 2021. **There is no grace period.** All others will provide coverage from the date and time of receipt by the agent.

You are insured when this completed, signed application is received by Vicencia & Buckley, a division of HUB International, and approved by the insurance company. PADI will be notified that your coverage is in force.

The brochure and application are for illustration purposes only and are designed as a general description of the policies. Coverage will be determined by the actual policy language.

PADI No. _____

Name _____
First Initial Last

Mailing Address _____

City _____ State/Province _____

Country _____ Postal/Zip Code _____

Email _____

Phone No. (_____) _____ Fax (_____) _____

Select Level of Coverage

- Instructor
- Divemaster
- Assistant Instructor
- Non-teaching/Supervising Instructor †
- Divemaster/Assistant Instructor Assisting Only**
- with TecRec Endorsement* for selection above
- Retired (inactive) Instructor ††
- EFR Only
- Swimming Instructor
- Freediving Instructor
- Cylinder Inspection Instructor*

Sign Here

I hereby declare that I have read, understand and accept the Exclusions on reverse.

I understand that coverage purchased under the PADI Retailer/Resort Instructional Policy may be canceled at the request of the PADI Retailer or PADI Resort Operator.

I also understand that the limits of liability declared on the certificate of insurance are shared between all staff members insured under the Retailer/Resort Instructional Policy, and coverage is afforded only while involved in the retailer/resort's teaching and supervisory activities.

Retailer/Resort Name

Retailer or Resort Member No.

Signature of Applicant

Date

* Submit proof of professional technical diving and / or Cylinder Inspection Instruction certification.
** Divemaster Member/Assistant Instructor Assisting Only option provides coverage to Divemasters and Assistant Instructors ONLY while assisting insured instructors with classes.
† No coverage will be afforded for any Open Water Scuba Instructor who teaches any form of scuba diving or snorkelling during the policy period.

Special Important Notice

READ CAREFULLY BEFORE COMPLETING AND SIGNING. YOU COMPLETE ONLY NO. 1 OR NO. 2 – NOT BOTH
Insurance coverage is only provided if the insurance company is put on notice of a possible claim through one of its authorized agents or PADI.

1

I, _____, (your name) have no knowledge of any incident, accident, occurrence, act, error, or omission that might lead to, or has already led to, a legal action or claim except any matter already reported to PADI, while insured with Vicencia & Buckley. I understand that I must report any incident, accident, occurrence, act, error, or omission to any previous insurer and that this policy does not cover any known incidents, accidents, occurrences, acts, errors, or omissions. **By applying for this insurance, I hereby authorize PADI to release information to the insurance company pertinent to the investigation of insurance claims.**

SIGNED

DATE

OR

2

I, _____, (your name) have knowledge of an incident, accident, occurrence, act, error, or omission not previously reported to PADI, while insured with Vicencia & Buckley, that might lead to, or already has led to, a legal action or claim for my supervisory or instructional activities. I understand that I must report any incident, accident, occurrence, act, error, or omission to any previous insurer and that this policy does not cover any known incidents, accidents, occurrences, acts, errors, or omissions. **By applying for this insurance, I hereby authorize PADI to release information to the insurance company pertinent to the investigation of insurance claims.**

Name of Person Injured _____ Date of Incident _____

Incident report filed: YES NO (Include or tell how to obtain) _____

Fatality YES NO Serious injury YES NO In training YES NO

Location of Incident _____ Brief summary of situation or possible claim _____

SIGNED (Sign here only if you have not signed above)

DATE

READ CAREFULLY BEFORE SIGNING PAGE 1

EXCLUSIONS

In addition to the specific exclusions contained in the policy, this insurance does not apply to:

X) Any claim arising out of any "occurrence" in which the insured knowingly permitted the uncertified student involved in the claim to leave the immediate area during in-water instruction without supervision and the attendance of an instructor or a certified assistant.

Y) Any claim arising out of any "occurrence" in which the insured left or permitted the uncertified student involved in the claim to be unattended during in-water instruction and/or testing.

Z) Any claim arising out of any "occurrence" involving a recreational training or supervisory dive conducted by an insured that is planned for depths greater than 40 meters/130 feet; planned with mandatory stage decompression (safety stops are acceptable); or planned using gas mixes other than compressed air, or enriched air unless all students are previously certified divers or are participating in an open water diver course with an enriched air training option.

This exclusion (Z) does not apply to any insured when Technical Diving coverage is indicated on the insured's certificate of insurance.

AA) Any claim arising out of any "occurrence" involving a technical training or supervisory dive conducted by an insured that is planned for depths greater than 100 meters/330 feet; or planned using gas mixes other than compressed air, enriched air, oxygen, or trimix.

BB) Any claim arising out of any "occurrence" in which the insured failed to obtain a medical history form completed by the student involved in the claim, prior to in-water instruction; and in the case of a minor, the failure to have obtained the minor's parent's or guardian's signature on the medical history form. Furthermore, this insurance does not apply if the medical history form indicated any condition contrary to safe participation in diving activities, and the insured failed to require the student to obtain medical approval (based on a medical examination) by a licensed physician, who is not the student, prior to in-water instruction.

CC) Any claim arising out of any "occurrence" during a training dive or swim instruction in which the insured had not first obtained from the student involved in the claim a signed release of liability/assumption of risk form developed or approved by the certification organization through which the training was offered; and in the case of a minor, the failure to have obtained the minor's parent's or guardian's signature on the form.

DD) Any claim arising out of any "occurrence" during a technical training dive in which the insured had not first obtained from the student involved in the claim a signed release of liability/assumption of risk form developed or approved by the certification organization through which the technical training was offered, specifically stating that the student acknowledges that the training involves technical dive training.

EE) Any claim arising out of any "occurrence" involving scuba instruction provided by the insured to a student under the age of ten (10), except for courses taught in confined water (e.g. swimming pools), which may be offered to anyone age eight (8) and older.

FF) Any claim arising out of any "occurrence" involving instruction in which the insured instructor and/or Dive Center/Resort Operator has not maintained records for the purpose of recording the progress of the student involved in the claim.

GG) Any claim arising out of any "occurrence" involving instruction in which the insured instructor and/or Dive Center/Resort Operator has not maintained records for the purpose of evaluating the understanding of the instructional material by the student involved in the claim.

HH) Any claim arising out of any "occurrence" involving instruction in which the insured instructor and/or Dive Center/Resort Operator has not retained all records relating to the individual student involved in a claim, for a minimum of five (5) years.

II) Any claim arising out of any "occurrence" involving the insured's conduct of an introductory experience program (any program designed to introduce uncertified divers to recreational scuba diving via a supervised, controlled open water dive experience) that was not in accordance with ISO 11121 Requirements for Introductory Programmes to Scuba Diving. This exclusion does not apply to confined water-only experiences being conducted by properly certified divemasters, assistant instructors and instructors.

For information and quotes, contact PADI's Insurance Agent, Vicencia & Buckley, a division of HUB International

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email: instructors@diveinsurance.com

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