

PARENTAL AUTHORISATION CHILD FIRST DIVE



I, the undersigned, Mr or Mrs

Legal representative of the child :

Name: First name:

Born:

Authorise my child named above to take part in the scuba diving baptism organised by
SERENITE PLONGEE

The

Authorises the person in charge of SERENITE PLONGEE, the organiser of the scuba diving experience, to take any decision with a view to calling in a rescue service or to evacuating or hospitalising my child in the event of an emergency if necessary.

If you are not staying on site, please give details of the person to contact in the event of an emergency:
Name: Tel:

The first dive are carried out in accordance with the legal provisions governing scuba diving (Code du Sport).

Authorises / does not authorise SERENITE PLONGEE to use my child's image
..... for communication purposes.

Signed at, on
Signature required (please write "**Read and approved**")