Hello, dear future guest!

Thank you for choosing our scenic island destination and we look forward to diving with you. Scuba St. Lucia is the resort diving operation belonging to Anse Chastanet and Jade Mountain Resorts near Soufriere. We would like to take this opportunity to offer information that may be useful in ensuring that your holiday will be a most enjoyable one. In order to prepare for your trip, we have compiled this document to share with you some general information but also some important medical information you should be aware of prior to traveling. Therefore, please take a few minutes to read through this document.

General Information: Scuba Diving with Scuba St. Lucia
The water temperature average 78-80°F / 26-27°C in the winter months and gets as high as 83-84°F / 28-29°C at the end of summer. Needless to say, we don't provide ice diving specialties. Most divers are comfortable with 2-3 mm shorty wetsuits. Visibility varies from 60-80 feet, 18-24 meters up to 100 feet/30 meters. Much of our diving is drift diving. We have canyons, walls, plateaus and a weekly wreck dive on the Lesleen M.

Diving with Scuba St. Lucia is a very unique experience and we offer the most experienced staff on the Island. Most of our Instructors have logged well over 2,500 dives and in some cases more than 6,000 dives; we know St. Lucia's waters better than anyone else. We are a PADI 5 Star Dive Resort and also part of DAN Partners in Dive Safety. We accept recognized agency certification cards from all over the world. We require proof of Open Water Diver Certification or higher prior to any diving activities with us as a certified diver. If you are a PADI diver, why not download the PADI App and get your digital e-card!

Diving Schedule
We are located in the heart of St. Lucia’s marine park which features numerous protected marine reserve dive sites. Marine park dive passes are required for certified divers or non-certified divers from the second day of diving. The fee is $13.50 EC per day ($5 US) or $40.50 EC (US$ 15) for an annual pass (plus tax). This fee is used to support the marine park and protect the marine habitat.

The farthest site is 15 minutes away; the closest is less than 30 seconds away. Therefore, nearly all of our boat dives are scheduled as one-tank dives. However, on Fridays we make a two tank dive, the first of which is the wreck of the Lesleen M, a very beautiful underwater garden of a 150 foot/ 50 meter cargo ship lying in 70 feet/21 meters of water. After the wreck dive we serve a variety of fruits on the
boat and visit a local beach for a surface interval before entering the water again on a beautiful wall
dive located nearby.

We offer Enriched Air (32% Nitrox) diving for those certified in its use. Enriched Air Certification
Courses are available through PADI’s eLearning system as well as a full range of PADI and SSI
courses.

The following is our diving schedule daily:
Shore Dives: 8:30 a.m., 11:00 a.m., 2:00 p.m.
Single Tank Boat Dives: 8:30 a.m., (except Fridays), 10:30 a.m. (except Fridays), 2:00 p.m. Night
Dives: 6:00 p.m. on Mondays and Wednesdays
2-Tank Wreck Trip: 9:30 a.m. Friday - return at 1:00 p.m.

For certified divers staying with us at our two resort properties, we can assure you that you will have
no difficulty booking various dives once you are with us at the resort but if you would like information
on our schedule and services or would prefer to pre-book your dives prior to your arrival, just let us
know; we’ll be delighted to assist. You can reach us via e-mail scuba@ansechastanet.com. If your
resort package includes a beginner Dive N’ Discover course (Discover Scuba Diving) or if you plan to
take your first dive with us during your stay, we would be very pleased to set this up for you. If your
stay is a minimum 5 nights, there is no need to pre-book as long you have some flexibility with your
daily activities schedule. If you are planning to get certified or partake in any other course during your
stay, we would definitely advise you to contact us via scuba@ansechastanet.com.

At Scuba St. Lucia, all certified divers are asked to make their first dive from the shore on the beautiful
Anse Chastanet reef where we take a few moments to check skills including mask removal and
replacement and regulator recovery. We do this to ensure that all divers are comfortable in the water
and are weighted properly to avoid any problems that might arise during a dive impacting your own
and the enjoyment of others.

Medical Questions
As a PADI 5 Star Dive Resort, we hold to the highest industry standards for safety and service. We
therefore ask you to consider carefully whether you, or anyone in your party, may have a medical or
physical reason that might make diving unsafe. Even veteran scuba enthusiasts may have had
changes in their medical status over time or may be taking medications for a temporary condition
which might present a risk when diving. We advise you to take a look at the attached medical and
obtain a doctors approval for diving if your medical status has changed since being certified.

Important: All beginner divers and Dive N’ Discover Course (Discover Scuba Diving) participants and
guests participating in any scuba course or refresher course, must complete the attached Medical
form. Please know that any ‘YES’ answer on the form requires an unconditional medical release
stating the diver/student is fit to dive before starting any diving course or diving with us. Please have
your doctor complete page two of the medical form attached.

We sincerely thank you for your cooperation and look forward to providing enjoyable and safe diving
for you.

Sincerely,
Your Scuba St. Lucia Dive Team
Tel: (758) 459-7755
Email: scuba@ansechastanet.com
www.scubastlucia.com
Please read carefully before signing.

This is a statement in which you are informed of some potential risks involved in scuba diving and of the conduct required of you during the scuba training program. Your signature on this statement is required for you to participate in the scuba training program offered by_____________________________________________________and located in the city of_______________________, state/province of _______________.

Read this statement prior to signing it. You must complete this Medical Statement, which includes the medical questionnaire section, to enroll in the scuba training program. If you are a minor, you must have this Statement signed by a parent or guardian.

Diving is an exciting and demanding activity. When performed correctly, applying correct techniques, it is relatively safe. When established safety procedures are not followed, however, there are increased risks.

To scuba dive safely, you should not be extremely overweight or out of condition. Diving can be strenuous under certain conditions. Your respiratory and circulatory systems must be in good health. All body air spaces must be normal and healthy. A person with coronary disease, a current cold or congestion, epilepsy, a severe medical problem or who is under the influence of alcohol or drugs should not dive. If you have asthma, heart disease, other chronic medical conditions or you are taking medications on a regular basis, you should consult your doctor and the instructor before participating in this program, and on a regular basis thereafter upon completion. You will also learn from the instructor the important safety rules regarding breathing and equalization while scuba diving. Improper use of scuba equipment can result in serious injury. You must be thoroughly instructed in its use under direct supervision of a qualified instructor to use it safely.

If you have any additional questions regarding this Medical Statement or the Medical Questionnaire section, review them with your instructor before signing.

Divers Medical Questionnaire
To the Participant:

The purpose of this Medical Questionnaire is to find out if you should be examined by your doctor before participating in recreational diver training. A positive response to a question does not necessarily disqualify you from diving. A positive response means that there is a preexisting condition that may affect your safety while diving and you must seek the advice of your physician prior to engaging in dive activities.

_____ Could you be pregnant, or are you attempting to become pregnant?
_____ Are you presently taking prescription medications? (with the exception of birth control or anti-malarial)
_____ Are you over 45 years of age and can answer YES to one or more of the following?
  • currently smoke a pipe, cigars or cigarettes
  • have a high cholesterol level
  • have a family history of heart attack or stroke
  • are currently receiving medical care
  • high blood pressure
  • diabetes mellitus, even if controlled by diet alone

Have you ever had or do you currently have...

_____ Asthma, or wheezing with breathing, or wheezing with exercise?
_____ Frequent or severe attacks of hayfever or allergy?
_____ Frequent or severe colds, sinusitis or bronchitis?
_____ Any form of lung disease?
_____ Pneumothorax (collapsed lung)?
_____ Other chest disease or chest surgery?
_____ Behavioral health, mental or psychological problems (Panic attack, fear of closed or open spaces)?
_____ Epilepsy, seizures, convulsions or take medications to prevent them?
_____ Recurring complicated migraine headaches or take medications to prevent them?
_____ Blackouts or fainting (full/partial loss of consciousness)?
_____ Frequent or severe suffering from motion sickness (seasick, carsick, etc.)?

The information I have provided about my medical history is accurate to the best of my knowledge. I agree to accept responsibility for omissions regarding my failure to disclose any existing or past health condition.

________________________   __________________________   ___________________________
Signature                                  Date                                    Signature of Parent or Guardian

Please print legibly.

Name_________________________________________ Birth Date ________________ Age ________

First Initial Last Day/Month/Year

Mailing Address

City_________________________________________ State/Province/Region_________________________________________

Country ______________________________________ Zip/Postal Code ______________________________________

Home Phone (___)_________________ Business Phone (___)_________________

Email ______________________________ FAX_________________________________________

Name and address of your family physician

Physician____________________________________ Clinic/Hospital_________________________________________

Address

Date of last physical examination _________________

Name of examiner________________________________ Clinic/Hospital_________________________________________

Address

Phone (___)_________________ Email __________________________________________

Were you ever required to have a physical for diving?  □ Yes  □ No  If so, when?________________________

PHYSICIAN

This person applying for training or is presently certified to engage in scuba (self-contained underwater breathing apparatus) diving. Your opinion of the applicant’s medical fitness for scuba diving is requested. There are guidelines attached for your information and reference.

Physician's Impression

□ I find no medical conditions that I consider incompatible with diving.

□ I am unable to recommend this individual for diving.

Remarks __________________________________________________________

__________________________________________________________________________ Date ___________________________

Physician’s Signature or Legal Representative of Medical Practitioner

Physician____________________________________ Clinic/Hospital_________________________________________

Address

Phone (___)_________________ Email __________________________________________