



J.A.W.S. CLUB MEMBERSHIP FORM

___ New Member ___ Renewing Member ___ Guest

NAME _____

ADDRESS _____

ADDRESS _____

TELEPHONE _____

EMAIL ADDRESS _____

I ___ DO ___ DO NOT WANT MY NUMBER & EMAIL LISTED IN THE NEWSLETTER.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISKS, AND INDEMNITY AGREEMENT

By signing this document you waive certain rights, including the right to sue.

PLEASE READ AND BE CERTAIN YOU UNDERSTAND THE IMPLICATIONS OF SIGNING.

EXPRESS ASSUMPTION OF THE RISKS ASSOCIATED WITH DIVING AND RELATED ACTIVITIES

I, _____ do hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with SCUBA diving and / or snorkeling. I fully understand that these risks can lead to severe injury and even death. I understand that diving operations may be conducted at a site that is remote from a recompression chamber, nevertheless, I choose to proceed even in the absence of a recompression chamber. Additionally, I understand that there are also risks associated with dive travel to and from dive sites. Despite the potential hazards and dangers associated with the activity of diving I wish to proceed and I freely accept and expressly assume all risks, dangers, and hazards that may arise from diving activities and which could result in personal injury, death, and property damage to me.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

In consideration of being allowed to participate in SCUBA diving and / or snorkeling activities as well as the use of any of the facilities and equipment of the below listed releases, **I HEREBY AGREE AS FOLLOWS:**

1. TO WAIVE AND RELEASE ANY AND ALL CLAIMS that I may have in the future against any of the following named persons or entities (hereafter referred to as releasees): J.A.W.S. Dive Club, any officers, directors, members, or guests
2. To release the releasees, their officers, directors, employees, representatives, agents, and volunteers, from any and all liability and responsibility, whatsoever, for any claim or cause of action that I, my estate, heirs, executors, or assigns may have for personal injury, property damage, or wrongful death arising from skin diving or SCUBA diving or club related activities, whether caused by the active or passive negligence of the releasees or otherwise. By executing this document, I agree to hold the releasees harmless for any injury or death which may occur to me during skin and / or SCUBA diving and / or any club related activities.
3. By entering into this Agreement, I am not relying on any oral or written representations or statements made by the releasees, other than what is set forth in this Agreement. I further agree that this Agreement shall be governed by and interpreted in accordance with the laws of the State of California, United States of America.

I hereby declare that I am of legal age and am competent to sign this Agreement or, if not, that my parent or legal guardian shall sign on my behalf, and that my guardian is in complete understanding and concurrence with this Agreement.

I HAVE READ THIS AGREEMENT, I UNDERSTAND IT, AND I AGREE TO BOUND BY IT

SIGNATURE OF PARTICIPANT _____ DATE _____

WITNESS (NAME) _____ SIGNATURE _____

SIGNATURE OF PARENT OR GUARDIAN IF PARTICIPANT IS A MINOR, and by their signature they, on my behalf, release all claims that both they and I may have:

SIGNATURE (of parent or guardian) _____ DATE _____