

DIVER CERTIFICATION CARD # _____
CERTIFYING AGENCY _____
Issued Sea Snips? ☐? Yes ☐? No ID #? _____

Diver Returned: _____ Time: _____
Initial _____
Sea Snips returned? ☐? Yes ☐? No

OCEAN WATCH FOUNDATION, INC.

BOAT/BEACH DIVER VOLUNTARY RELEASE, WAIVER, AND ASSUMPTION OF RISK

Rev. 6/04/06

Please read carefully and fill in all blanks before signing. I, _____, hereby affirm that I am a certified diver and that I ☐? **Diver** ☐? **Snorkeler** am proficient in dive-table usage and will be responsible for my own monitoring of depth and time under water and I fully understand the hazards of scuba diving and the possibility of injury or death. I understand that these hazards include, but are not limited to, decompression sickness, lung injuries, air embolism, equipment failure, physical exertion, panic, nitrogen narcosis, bad or inadequate air supply, entanglement, exposure to sea life, other divers, drowning and other perils of the sea. By signing this release, I certify that I am fully aware of and expressly assume these and all other risks involved in making such a dive or dives, whether conducted as a recreational dive or part of a beach cleanup.

I understand and agree that neither the **City of Pompano Beach nor Ocean Watch Foundation, Inc.**, nor any of its volunteers, nor the owners, officers, employees, agents, nor assigns of the above listed individuals and/or entities (hereinafter "Released Parties") may be held liable or responsible in any way for any occurrence on this dive trip which may results in personal injury, property damage, wrongful death or other damage to me or my family, heirs, or assigns that may occur as a result of my participation in this beach cleanup and scuba dive(s) or as a results of the negligence of any party, including the Released Parties, whether passive or active.

I further state that I am of Lawful age and legally competent to sign this liability release, or that I have obtained the written consent of my parent or guardian.

I, BY THIS INSTRUMENT, DO HEREBY EXEMPT AND RELEASE ALL THE ABOVE LISTED ENTITIES AND/OR INDIVIDUALS FROM ALL LIABILITY AND RESPONSIBILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH HOWEVER CAUSED, INCLUDING, BUT NOT LIMITED TO, PRODUCT LIABILITY OR THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE.

I ACKNOWLEDGE THAT I HAVE READ THE FOREGOING PARAGRAPHS, FULLY UNDERSTAND THE POTENTIAL DANGERS INCIDENTAL TO ENGAGING IN THIS BEACH CLEANUP AND SCUBA DIVE(S), AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING THIS INSTRUMENT, AND THAT I UNDERSTAND AND AGREE THAT THIS DOCUMENT IS LEGALLY BINDING AND WILL PRECLUDE ME FROM RECOVERING MONETARY DAMAGES FROM THE ABOVE LISTED ENTITIES AND/OR INDIVIDUALS. WHETHER SPECIFICALLY NAMED OR NOT, FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR PRODUCT LIABILITY.

PRINTED NAME _____ DATE _____

PRINT LEGIBLY

ADDRESS _____

City

State

Zip

PHONE # (_____) _____ E-mail Address: _____

SIGNATURE: _____ EmergencyContact: _____

SIGNATURE of Parent or Guardian _____ Emergency Contact Ph. (_____) _____

During this event. Relationship _____