



For Office Use Only

ALL SCUBA/SNORKELER VOLUNTEERS MUST READ, SIGN & DATE

I, _____, acknowledge that by signing this release I will exempt my dive partner ("Buddy"), the State of Ohio and its employees, Coastweeks committee members, sponsoring organizations, the divemaster, dive coordinator, and all other divers/snorkelers and volunteers from liability for personal injury suffered or wrongful death, whether or not negligently caused during any Coastweeks activity.

For and in consideration of the mutual promises made hereby and herein, I voluntarily release, discharge, and relinquish any and all actions or causes of action arising as a result of the activities involving scuba diving and/or snorkeling on the date noted hereunder.

I also release on behalf of myself, my heirs, executors, administrators and assigns any entity(ies), from any and all causes of action; and further for myself any my heirs, executors, administrators, and assigns, I do hereby release, waive, discharge, and relinquish any action or causes of action which may hereafter arise for myself, and for my estate, and agree that under no circumstances will I or my heirs, executors, administrators, and assigns prosecute, present any claims against aforementioned persons and entities for personal injury, property damage, or wrongful death whether or not negligently caused.

I, for myself, my heirs, executors, administrators or assigns agree that in the event any claim for personal injury, property damage, or wrongful death shall be prosecuted against the herein described entities, I shall indemnify and hold it or each of them harmless from any and all claims or causes of action by whomever or wherever made or presented for personal injury, property damage, or wrongful death.

I acknowledge that I have read the foregoing paragraphs, have been fully advised of the potential dangers incidental to engaging in the activity involving scuba diving and/or snorkeling, and am fully aware of the legal consequences of signing this instrument.

I specifically waive any claim or right to assert same in any cause of action, alleged cause of action, claim or demand that has been, through oversight or error, intentional or unintentional, omitted from this release.

Thank you for making a difference. Reminder: Safety first!



SNORKELER MUST SIGN BELOW

Signature of Snorkeler: _____ Date: _____

Signature of _____ Date: _____

Parent/Guardian – required if under 18 years of age



DIVER MUST SIGN BELOW AND PROVIDE FOLLOWING INFORMATION

I, _____ declare that the scuba certification information listed on this release is my valid certification information.

Certifying Agency: _____ Divemaster's initials: _____

Certification Number: _____ Divemaster's initials: _____

Signature of Diver: _____ Date: _____

Signature of _____ Date: _____

Parent/Guardian – required if under 18 years of age



TO BE COMPLETED BY DIVEMASTER

As divemaster for this Coastweeks activity, I declare that the above signed person's credentials as a diver/snorkeler have been verified.

Signature of divemaster: _____ Date: _____