Maritime Archaeological Society

COMPLETE LIABILITY RELEASE FOR DIVING OPERATIONS

- 2. I am a certified diver and have been taught and understand that diving and other underwater activities have inherent risks and dangers associated including, but not limited to, equipment failure, perils of the sea and acts of fellow divers, and I specifically assume such risks.
- 3. I acknowledge that I am physically fit to engage in underwater diving. I will not hold any of the above named entities responsible if I am injured or have any illnesses or medical problem, which occurs while I am diving.
- 4. I am not taking, nor have I recently taken any drugs or medication, either lawful or unlawful, that would contraindicate diving.
- 5. I understand I have a duty to plan and carry out my own dive and am responsible for my own safety and the safety of my buddy.
- 6. I will be present at and attentive to the safety briefing given on the dive station/boat and if there is anything that I do not understand or have been taught differently, I will request clarification immediately.
- 7. I fully understand and am aware that the dive location/boat is equipped with only first aid supplies and that in the event of illness or injury appropriate medical help must be summoned and that treatment will be delayed until I can be transported to a proper medical care facility.
- 8. I VOLUNTARILY ASSUME ALL RISK IN CONNECTION WITH SCUBA DIVING ACTIVITIES. IT IS MY INTENTION BY THIS INSTRUMENT TO EXEMPT AND RELIEVE THE MARITIME ARCHAEOLOGICAL SOCIETY AND ITS PRINCIPALS, EMPLOYEES, AGENTS AND DIVE BOATS (WHETHER OWNED, OPERATED, LEASED OR CHARTERED) AND TO HOLD THESE ENTITIES HARMLESS FROM ANY AND ALL LIABILITY FOR ILLNESS OR PERSONAL INJURY, WRONGFUL DEATH OR PROPERTY DAMAGE THAT I MAY SUSTAIN AS A RESULT OF PARTICIPATION IN THE DIVE PROGRAM INCLUDING NEGLIGENCE OF THE MARITIME ARCHAEOLOGICAL SOCIETY, ITS PRINCIPALS, EMPLOYEES AND AGENTS.

9.	I HAVE READ THE FOREGOING IN ITS ENTIRETY AND AGREE TO THE
	TERMS AND CONDITIONS HEREIN ABOVE SET FORTH ON BEHALF OF
	MYSELF, MY HEIRS, AND MY PERSONAL REPRESNETATIVES. I FURTHER
	ACKNOWLEDGE THAT I AM AT LEAST 18 YEARS OF AGE AND AM
	LEGALLY RESPONSIBLE FOR MAKING DECISIONS ON MY OWN BEHALF.

Signature:	Date:	_
Printed Name:		
		_
Witness:		