



MarineLab
ENVIRONMENTAL EDUCATION

STUDENT
SCUBA Registration Form &
Waiver

PARENTS: Please sign on the line noted below. This signature must be NOTARIZED in order for your child to participate in a MarineLab program. In addition, the release on the reverse side of this page must be INITIALLED and SIGNED by you and your child.

STUDENT NAME _____ DATE OF BIRTH ___/___/___ AGE _____ SEX _____

ADDRESS _____ CITY, STATE, ZIP _____

PARENT/GUARDIAN NAME _____

WORK PHONE _____ HOME PHONE _____

SCHOOL _____ PROGRAM DATES _____

MY HEALTH/ACCIDENT POLICY IS WITH _____

WHOSE ADDRESS IS _____

POLICYHOLDER NAME _____ POLICY NUMBER _____

THIS POLICY DOES/DOES NOT COVER MY CHILD (NAME) _____

MEDICAL INFORMATION List ANY medical problems, allergies, chronic symptoms, or medications presently being taken.

SPECIAL DIETARY NEEDS _____
(Vegetarian, allergies, etc.)

EMERGENCY TREATMENT RELEASE

I hereby give permission for MRDF to provide any medical assistance they feel appropriate for my child named above. I also give permission for Mariner's Hospital or any other medical personnel to treat my child in the event of an emergency. I will be responsible for any and all medical expenses incurred.

Signature of Parent/Guardian _____ Date _____

This person is personally know or provided identification: Driver's License # _____

Notary Signature _____ Notary Stamp

Printed Name _____

Date _____ My commission expires _____

MARINE RESOURCES DEVELOPMENT FOUNDATION
MarineLab SCUBA Waiver of Liability/Implied Consent Form

Please initial each paragraph!

I, _____, (hereinafter referred to as "**Releasor**") hereby
(Participant's name - please print)
affirm that I have been well advised and thoroughly informed of the inherent hazards of skin and SCUBA diving.

_____ **Releasor**, in consideration of the permission granted to **Releasor** by Key Largo Undersea Park, Marine Resources Development Foundation Inc., property owner(s), instructors, members, employees, officers, agents, or assigns, (hereinafter referred to as "**Released Parties**") for my participation in these diving activities and any other related activity the **Released Parties** may not be held liable or responsible in any way for any injury, death, or other damages to me or my family, heirs, or assigns.

_____ **Releasor**, for himself/herself and his/her personal representatives, heirs, next of kin, executors, administrator and assigns, hereby forever releases, waives, indemnifies, holds harmless, discharges and covenants not to sue **Released Parties** from any and all actions, causes of action, damages, claims, demands or other liabilities, either in law or in equity, arising from or by reason of any bodily injury or personal injuries known or unknown, including death and/or any property or equipment damage known or unknown which may occur as a result of or in connection with **Releasor's** participation in these diving activities or any other related activity, caused by the ordinary negligence of any party including the **Released Parties** whether active, passive or otherwise.

_____ **Releasor** understands that participation in certain education activities, may consist, in whole or part, of SCUBA diving, Snorkeling, Skin Diving and/or living and working in an underwater laboratory and/or underwater hotel, diving with a variety of surface supplied air systems including hookah and full-face masks, boat diving, diving in the Emerald Lagoon, and training in the surrounding areas, the receipt of which permission is hereby acknowledged, and for other good and valuable considerations, the receipt of which is hereby acknowledged, **Releasor** hereby personally assume all risks in connection with said course for any harm, injury, or damage that may befall he/she while enrolled as a student of this course or after completion of the course, including all risks connected therewith, whether foreseen or unforeseen.

_____ **Releasor** acknowledges that he/she has been fully advised of and has actual knowledge and conscious appreciation of the particular risks associated with diving with compressed gas, including but not limited to those risks and dangers which could result in death, drowning, air embolism, illness (physical or mental), or damage to him/herself, his/her property, or to other third parties, and all other risks and dangers naturally inherent in diving, including the risk of decompression sickness or bends, embolism, or other hyperbaric injuries which can occur that require medical treatment in a recompression chamber. **Releasor** understands that the open water dive trips which are necessary for training and certification, may be conducted at a site that is remote, either by time or distance or both, from such a recompression chamber. **Releasor** still chooses to proceed with such instructional dives in spite of the possible absence of a recompression chamber in proximity to the dive.

_____ **Releasor** acknowledges that Skin and SCUBA Diving are physically strenuous activities and that he/she will be exerting himself/herself during this instructional program, and that if he/she is injured as a result of a heart attack, panic, hyperventilation, etc., that he/she expressly assumes the risk of said injuries and that he/she will not hold the **Released Parties** responsible for same.

_____ **Releasor** realizes that he/she is responsible for any and all injury to persons or damage to property which may occur as a result of or in connection with his/her participation in said activities. **Releasor** hereby acknowledges that he/she is fully advised of and has actual knowledge and conscious appreciation of the particular risks and dangers involved in said activities, including but not limited to those risks and dangers involved in traveling by automobile and boat to research and education locations, and spending periods exposed to the sun and weather in the research/education area or boat with its concomitant risks of motion sickness.

_____ **Releasor** hereby acknowledges that he/she elects voluntarily to fully assume all risks and confront all dangers, and is aware that he/she **should not** fly for 24 hours, dive for 12 hours, or dive deeper than 30' for the 12 - 24 hours after emerging from a habitat stay. **Releasor** expressly agrees that this Agreement/contract is intended to be as broad and inclusive as permitted by the laws of the State of Florida, and that if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full force and effect.

_____ **Releasor** hereby represents and warrants that he/she is a qualified and certified SCUBA diver or is taking SCUBA lessons from a certified instructor, and is in good health and physically fit to SCUBA dive, and has no health conditions that would prevent compressed gas diving, and is at least 18 years of age and has carefully read this agreement and understands all of its contents, and executes it voluntarily and with full knowledge of its significance. If he or she is not 18 years of age, then this release must be read and signed by a parent or guardian of the participant.

_____ **Releasor** further agrees that all ancillary rights, including but not limited to, publicity, movies, television, photo, literary, and replica rights, are exclusively the property of Marine Resources Development Foundation. Releasor may make public mention that he/she has participated in the MarineLab Aquanaut & Research Experience, the MarineLab Environmental Education Program, MarineLab Undersea Laboratory, and/or marine ecology programs, but must credit the Marine Resources Development Foundation as operator of the facility.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS WAIVER OF LIABILITY/IMPLIED CONSENT FORM BY READING IT BEFORE SIGNING IT. IN WITNESS WHEREOF, **RELEASOR** has executed this agreement at

_____ on _____
(place) (date)

(Participant Signature)

(Signature of Parent or Guardian if Participant is a minor)