

## ADULT WAIVER & LIABILITY RELEASE/ALL Events/Lk Cleanups, etc WAIVER/RELEASE for all Adults/Club Members/Participants and VOLUNTEERS (\*Youths - If under 18 see over for Youth Only Form, fill out/sign as required)

## **PLEASE—YOU MUST PRINT CLEARLY & READ CAREFULLY:**

NAME:			
Address:		DOB:	M/D/Y
City/Town:	Prov:	Postal Code:	
Hm Phone #:	Email:		**AUC eNEWS? Y / N
Emergency C	Contact's Name:Ph	#:	
Relationship	to you:	Present at thi	s event: YES / NO
Scuba Certifi	cation # Level: Agency: ACUC, N	IAUI, PADI, PDIC, SSI, SD	I/TDI, Other:
AUC 8	LUB Membership is required for all events & info above is used for AUC at a club membership renewal due at anniversary date.  S contains reminders about AUC dive events/lake cleanups, scuba club news, dive at Release and Express Assumption of Risk for AUC/CL	cle Y / N to sign-up for time safety, etc., and you can un JB DIVE EVENT/LA	ely Email News! subscribe at anytime. KE CLEANUP
	Please read carefully, fill in all blanks and initial each paragi	<u>aph</u> before signing bel	ow:
Ι,	(Please clearly print your name again here)	affirm I, as a participant/ce	ertified scuba diver, know,
	rwise been advised and thoroughly informed of the inherent risks & hazards of event, or INITIAL" each paragraph below after reading:	snorkeling, skin diving and scu	ba diving (if applicable).
	I further understand this AUC/Club Event might be conducted at a site that is remote, or facilities such a recompression chamber. If applicable, I understand diving compres sickness, embolism, or other hyperbaric injuries can occur even in the recompression related activities or dives in spite of the possible absence of medical facilities and a recompression related activities are diversible and a recompression related activities or dives in spite of the possible absence of medical facilities and a recompression related activities or diversible activities and a recompression related activities or diversible activities are diversible activities.	sed air involves certain inherer chamber. I still choose to parti	nt risks; decompression cipate in the event and
	In consideration of being allowed to participate in this AUC/Club Event, I personally as injury or damage that may befall me while participating in this AUC/Club Event including		
	I further save and hold harmless the Alberta Underwater Council, its servants, agents my family, estate, heirs, or assigns, arising out of my participation in this AUC/Club Ex	and representatives from any c vent including both claims arisin	laim or lawsuit by me, ng during event or after.
	I also understand snorkeling, skin diving, scuba diving, paddling, boating, hiking are pl during this <i>AUC Event</i> and, if I am injured as a result of heart attack, panic, hyperventi whether foreseen or unforeseen and I will not hold the above listed individuals, clubs,	ation, etc. I expressly assume	the risk of said injuries,
	I also understand that any activities on or around swimming pools, rivers, lakes or othe to slippery surfaces, hazards, trees, branches and/or other debris or items in or near the or near drowning or other perils. I understand these risks foreseen and unforeseen and or all of associated individuals, clubs, entities, sponsors or companies responsible.	ne water causing falls, impact,	entanglement, drowning
	I will inspect all of my water sport/scuba equipment prior to the activity. I will not hold the my equipment (including safety gear) prior to snorkeling, swimming, diving (or paddling)		
	I declare that I am in good mental and physical fitness for this activity, and that I am no influence of any drugs that are contraindicated to my participation in this activity. If I a physician and have approval to participate in this activity especially while under the inf	m taking medication, I declare	that I have seen a
	I understand the terms here are contractual and not a mere recital and I have signed the acknowledge this is a legally binding document.	nis document of my own free a	ct. I understand and
	I further state I am of lawful age and legally competent to sign this liability release and COVID-19 and/or any other emerging public health concerns or conditions. <i>My partici</i>		
	PHOTO/VIDEO RELEASE: Yes, I hereby give permission for images of myself/child/fathe Alberta Underwater Council through video, photo and digital camera to be used so material, publications, website, Facebook or other social media, etc., and waive any right	lely for the purposes of the AU	C's or club promotional
	COVID-19: I declare that I am fully COVID-19 vaccinated (if applicable) and will compand/or any other emerging public health conditions or concerns, while participating in a		n mandates for COVID 19
T IS THE INTE	NTION OF	BY THIS	INSTRUMENT TO
AGEN RELA AGAII "AUC/ I HAVE FULI	(Please clearly print your name again here!)  LVE THE ALBERTA UNDERWATER COUNCIL, THE HOSTING CLUBS, THEIR MEMBERS, ENITS AND SUCCESSORS OF ALL RESPONSIBILITY AND LIABILITY RESULTING FROM ANY ACTION TO, ANY AND ALL EVENTS AND ACTIVITIES OF THIS "AUC EVENT". I HEREBY INDEL INST ALL CLAIMS, DEMANDS, LOSSES, COSTS AND EXPENSES IN ANY MANNER BASED UPOUT UB MEMBERSHIP and/or EVENT".  LY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEA BEFORE I SIGNED IT ON BEHALF OF MYSELF AND MY HEIRS.	CCIDENT OR MISHAP THAT MA' MNIFY AND SAVE HER MAJEST N, ARISING OUT OF, OR CONNE	Y OCCUR DURING, OR IN Y HARMLESS FROM AND CTED WITH, THIS
	Signature of Certified Scuba Diver/Participant/Volunteer	Date	
	o.g or cortinua coasa strom articipanti rotatitori	Date	