



Website: www.capediveclub.com
Email: capedive@capediveclub.com

Cape Dive Club Membership Application

Name: _____ Street Address: _____

Town: _____ State: _____ Zip Code: _____

Mailing Address (if different): _____

Email address: _____ Occupation: (optional) _____

Home Phone: (_____) _____ Other Phone: (_____) _____

Birthday Month: _____ Day: _____ Year _____

Certification Agency: _____ Certification Level(s): _____

Date Received: _____ Do you keep a Dive Log: _____ Yes _____ No

If Known - Number of dives this year: _____ Last year: _____ Lifetime Dives: _____

What type(s) of diving would you be interested in learning?

Shore: ___ Boat: ___ Wreck: ___ Lobster: ___ Scallop: ___ Night: ___ Ice: ___ Photo/Video: ___ Dive Travel: ___

Technical: ___ Rebreather ___ Other: _____

Do you own a boat you plan to dive from? ___ Yes ___ No

Do you want to be on the Buddy List (A list other members can contact you for diving) ___ Yes ___ No

Are you interested in helping with any of the following:

___ Meeting Places/Setup ___ Guest Speakers ___ Shore Dives ___ Fund Raising
___ Boat Dives ___ Meeting Topics ___ Raffle Donations
___ Website Help ___ Other _____

By signing below I attest that I have read and signed a copy of the Cape Dive Club Diver Information and Assumption of Risk, Release, And Hold Harmless Agreement.

By signing below I attest that I am in good health and of sound mind.

Signature: _____ Date: _____

All news and updates will be sent via Email- please make sure you listed your email above.

**NEW Member Only - Annual Membership Dues: ___ Individual \$40.00 ___ Family \$65.00
___ Associate (non-diver) \$15.00 - Renewal Rates are less after your first year for all memberships**

You may bring your application with you to the next meeting or you may complete the application and the [Cape Dive Club Diver Information and Assumption of Risk, Release, And Hold Harmless Agreement](#) and mail both forms to:

**Cape Dive Club
PO Box 92
Centerville, MA 02632**

** Please Complete the Back/Second Page of This Form **

CAPE DIVE CLUB

**DIVER INFORMATION AND ASSUMPTION OF RISK,
RELEASE AND HOLD HARMLESS AGREEMENT**

Name: _____

Address: _____

Phone: (Day) _____ (Evening) _____

Email Address: _____

CAPE DIVE CLUB (hereinafter the "Club") is a non-profit organization. It is not the responsibility of the Club to ensure the safety, skill, education, or training, of any individual who chooses to participate in any Club event. As a result, the Club assumes no responsibility for the safety of any individual who participates in a club sponsored event. **Any individual or representative who signs this waiver and release agrees to make no claims of any kind whatsoever against the Club, its membership, individual members, and its Officers and Directors. I understand that by signing this document I agree that I am responsible for my own actions and understand that the Club will assume I have all the requisite skill, knowledge, and level of physical fitness to participate in any Club event. In plain language I understand that by signing this document I am agreeing no one is responsible for me but myself in any Club activity and neither I nor my representatives will make any claim for personal or property damage against the club.**

The following is the "legal language" which incorporates the above principal:

- (i) I hereby assume the risk of injury, death, or damage to person or property which I may suffer in the course of engaging in any Club activities.
- (ii) I hereby remise, release, and forever discharge the Cape Dive Club its officers, directors, employees, or members from any liability for personal injury, death, or damage to property which I may suffer in the course of engaging in such activities, from any cause whatsoever, including the negligence or recklessness of the Club its officers, directors, employees, or members.
- (iii) I hereby agree to indemnify, defend, and hold harmless the Cape Dive Club, its officers, directors, employees, and members for and against any claims made against them or any of them by any third party for personal injury, death, or property damage arising in any way out of my engaging in such activities.
- (iv) I have read and understood the language in this release and have had the time to consider its implications on myself, my family, and anyone representing me.

Name: (Print) _____

(Signature) _____

Witness: _____ Date: _____

Person to be notified in case of emergency:

Name: _____

Address: _____

Phone: _____