

Renewal Due: _____

Cape Dive Club Membership Renewal Application 2011

Name: _____ DOB: _____

Street Address: _____

Town: _____ State: _____ Zip Code: _____

Mailing Address (if different): _____

All newsletters will be sent electronically via email – please provide an address below.

Email address: _____ Occupation: (optional) _____

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

If you have a family membership – complete each members name and DOB below.

Each member needs to sign a copy of the waiver on the back of this page. (You may photo copy or ask us for copies)

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Do you want to be on the Buddy List _____ Yes _____ No

Are you interested in helping with any of the following:

____ Guest Speakers ____ Shore Dives ____ Event Help ____ Newsletters
____ Boat Dives ____ Meeting Topics/Workshops ____ 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: _____

Annual Membership Renewal Dues: ____ Individual \$25.00 ____ Family \$45.00 ____ Associate (non-diver) \$10.00

Please make checks payable to: Cape Dive Club

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 –complete both sides of this form and mail the form 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: _____