

ROCKY MOUNTAIN
LIABILITY FORM

ASSUMPTION OF RISK AND LIABILITY FOR RECREATIONAL DIVING AND/OR COMPETITION. READ CAREFULLY, THEN SIGN.

I (print name) _____ hereby affirm I am a freediver and/or scuba diver and underwater sports competitor, and I am in good health and capable of participating in said event or events. I am aware of all inherent dangers of freediving and/or scuba diving and underwater sports. I am aware of the basic safety rules of underwater activities and sports. I desire to participate in one or all of the Rocky Mountain Spearfishing Series (RMSS). I understand the purpose of the event is strictly recreational and it is not the function of the organizers to serve as guardians of my safety. I hereby volunteer, release, discharge, waive, and relinquish any and all actions and causes of action for personal injury, property damage, or wrongful death occurring to me. I do for myself, heirs, executors, and administrators agree to not prosecute or present any claim for personal injury, property damage, or wrongful death against the organizers of the RMSS or the association for any said cause of action, whether the same shall arise by the negligence of any said persons or organizations.

It is my intention by signing this document to exempt the organization and organizers of the RMSS or the RMSA from liability for personal injury, property damage, or wrongful death caused by negligence or any other reason. I understand and agree I am participating in this activity voluntarily and agree to be completely responsible for my own actions. I hereby declare I am of lawful age and legally competent to sign this agreement. I understand the terms herein are contractual and not a mere recital and I have signed the document of my own free will.

I ACKNOWLEDGE I HAVE READ THE PREVIOUS PARAGRAPHS AND FULLY UNDERSTAND THE LEGAL RIGHTS I AM GIVING UP BY SIGNING THIS DOCUMENT AND THAT I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS AGREEMENT BY READING IT BEFORE SIGNING IT.

Signature _____ Date _____

Signature (Parent/Guardian) _____ Date _____