BSC LIABILITY RELEASE and EXPRESS ASSUMPTION of RISK
"THIS IS A RELEASE OF YOUR RIGHTS TO SUE" BAINBRIDGE SPORTSMEN'S CLUB, INC.
2037 RIVER RD. BAINBRIDGE, PA 17502 (717) 426-2114

This release may be used against you in a court of law if you sue any released party or person.
(Please read carefully, fill in the blanks, sign and date this agreement)

I, _____, hereby affirm that I have been advised and thoroughly informed of the inherent hazards of snorkeling, skin diving and scuba diving.
I further understand that diving with compressed air involves certain inherent risks: decompression sickness, embolism, or other hyperbaric injuries can occur that require treatment in a recompression chamber. I further understand that the open-water training dives, which are necessary for training and for certification, conducted at this site are some distance from the nearest recompression chamber. I still choose to proceed with my dives in spite of the proximity to the nearest recompression chamber. I affirmatively represent that I am adequately and properly trained and certified for this activity and I further represent that I am adequately and properly prepared and conditioned mentally and physically for snorkeling, skin diving and scuba diving.

I understand and agree that neither BAINBRIDGE SPORTSMEN'S CLUB, INC (BSC) nor any of it's employees, officers, agents, or assigns (hereinafter referred to as "released parties") may be held liable or responsible in anyway for any injury, death or other damages to me or my family, heirs, or assigns that may occur as a result of my participation in scuba diving in this diving facility, or as a result of the negligence of any party, including the released parties, whether passive or active.

In consideration of being allowed to dive on these premises, I hereby personally assume all risks in connection with said dives, for any harm, injury, or damage that may befall me while diving at BSC; including all risks connected therewith, whether foreseen or unforeseen. I further save and hold harmless said released parties from any claim or lawsuit by me, my family, estate, heirs, or assigns, arising out of my participation in snorkeling, skin diving and scuba diving at BSC.

I understand that skin diving and scuba diving are physically strenuous activities and that I will be exerting myself during , and that if I am injured as a result of a heart attack, panic, hyperventilation, etc that I expressly assume the risk of said injuries and that I will not hold the above listed individuals or companies responsible for the same.

I further state that I am of lawful age and legally competent to sign this release of liability, or that I acquired the written consent of my parent or guardian.

I also understand that limited visibility, cold water and deep diving take additional training, and sometimes very special advanced training, and that I will take the responsibility to further my education accordingly before attempting these dives.

I understand that the terms herein are contractual and not a mere recital, and that I have signed the document of my own free will. I also understand that I may not dive at BSC without first entering into this agreement.

It is my intention that this instrument serves to exempt and release Bainbridge Sportsmen's Club, Inc. and all related entities as defined above, from liability or responsibility whatsoever for personal injury, property damage or wrongful death however caused, but not limited to the negligence of the released parties, whether passive or active; and it is my intention to be legally bound hereby.

I have fully informed myself of the contents of this Liability Release and Express Assumption of Risk by reading it before I signed it on behalf of my heirs and myself.

CERTIFIED DIVERS:

_____
DIVER'S SIGNATURE DATE

TRAINING ORGANIZATION:_____
CERTIFICATION LEVEL:_____
CERTIFICATION #: _____

STUDENTS:

_____
STUDENT'S SIGNATURE DATE

TRAINING ORGANIZATION: _____
DIVE STORE:_____
INSTRUCTOR:_____

ARE YOU: Night Diving: YES_____ NO_____ Camping: YES_____ NO_____

Vehicle Make/Model:_____ Color:_____ License Plate #:_____ State:_____

NON DIVER: _____
NON DIVER SIGNATURE DATE

PARENT OR GUARDIAN OF MINOR (under 18 yrs): I, _____, hereby affirm that I have been advised and thoroughly informed of said Liability Release and assume the responsibility of the above said minor.

SIGNATURE: _____ **DATE**:_____