

Cape Fear Dive Center, LLC  
809 N. Lake Park Blvd.  
Carolina Beach, NC 28428

**Liability Release for Supervision of Certified Divers, Student Divers, Snorkelers,  
Freedivers, and Boat Riders**

**THIS IS A RELEASE OF YOUR RIGHTS TO SUE CAPE FEAR DIVE CENTER LLC AND IT OWNERS, MEMBERS, EMPLOYEES, AGENTS, AND ASSIGNS FOR PERSONAL INJURIES OR WRONGFUL DEATH THAT MAY OCCUR DURING THE FORTHCOMING DIVE ACTIVITY AND/OR BOAT TRAVEL AS A RESULT OF THE INHERENT RISKS ASSOCIATED WITH SCUBA DIVING, SNORKELING, FREEDIVING, BOAT TRAVEL OR AS A RESULT OF NEGLIGENCE.**

Please place you initials next to each of the following sections to acknowledge that you have read and understand each one, and sign at the bottom. If you are a nondiver (boat rider), please initial # 2,3,4,6,10,11,13,14,15 and 16 only and sign the bottom.

\_\_\_\_\_ 1. I acknowledge that I am a certified scuba diver trained in safe diving practices and that I have been diving in the last six months or am currently participating in a refresher course or I am a student diver under the direct supervision of an instructor.

(Instructor's Name and Signature)

\_\_\_\_\_

\_\_\_\_\_ 2. I am aware of the inherent risks and dangers associated in this sport including, but not limited to, risk associated with equipment failure, perils of the sea, acts of fellow divers and I SPECIFICALLY ASSUME SUCH RISKS>

\_\_\_\_\_ 3. I affirm that I am in good mental and physical fitness for diving, that I do not have in my possession any illegal drugs or alcoholic beverages and that I am not under the influence of alcohol, nor am I under the influence of any drugs that are contra indicatory to diving. If I am taking medication, I affirm that I have seen a physician and have approval to dive while under the influence of the medication/drugs.

\_\_\_\_\_ 4. I am aware of the dangers of breath holding while scuba diving, and I will not hold Cape Fear Dive Center LLC, or its members, employees, agents and assigns and related entities (such as employees, instructors, certified assistants, boat operators, or diver training agencies) responsible if I am injured doing so.

\_\_\_\_\_ 5. I take full responsibility for myself and understand the buddy system as taught to me by my training agency. I know that I should stay with my buddy and follow the safe buddy rules. I understand solo diving is not a sanctioned activity and if I lose my dive buddy, I will look for my buddy for no more that one minute and I will make an immediate and slow ascent to the surface, looking and listening for boat traffic as I ascend.

\_\_\_\_\_ 6. Prior to leaving the dock, I will assemble and inspect all equipment I will use in

the dive/snorkeling activity. I will not hold the above listed individuals responsible for an equipment problem due to my failure to inspect my equipment.

\_\_\_\_\_ 7. I will be present at and attentive to the safety briefing given by the dive supervisor and boat captain and if there is anything that I do not understand or have been taught differently, I will notify the boat captain or dive supervisor immediately. If I plan a dive different than the plan recommended by the dive supervisor or boat captain. I will notify the boat captain or dive supervisor prior to beginning my dive and I understand that I am taking an increased risk and assume this additional risk.

\_\_\_\_\_ 8. I will start my ascent at the end of each dive with enough air to assure being on the boat with a minimum of 500 psi remaining in my tank, after a slow ascent and safety stop as recommended by my training agency.

\_\_\_\_\_ 9. I will immediately stop my dive if I feel uncomfortable with my diving abilities, and/or diving conditions are worse than those for which I have been trained or for which I have experience.

\_\_\_\_\_ 10. If I become distressed on the surface, I will IMMEDIATELY drop my weight belt and inflate my B.C.D. for permanent flotation assistance and if I want or need assistance from the boat, I will give the proper "diver in trouble" signal.

\_\_\_\_\_ 11. I acknowledge that I am physically fit to scuba dive/snorkel, and I will not hold the above listed individuals responsible if I am injured as a result of heart, lung, ear, or circulatory problems or other illnesses that occur while diving and/or snorkeling.

\_\_\_\_\_ 12. I understand that even though I follow all of the appropriate dive practices, there is still some risk of my sustaining decompression sickness, embolism or other hyperbaric injuries, and I expressly assume the risk of said injuries.

\_\_\_\_\_ 13. I also understand that scuba diving/snorkeling is a physically strenuous activity and that I will be exerting myself during this diving excursion, and then 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 responsible for the same.

\_\_\_\_\_ 14. I also understand that on this open water diving trip, I will be at a remote site and that there will not be immediate medical care or hyperbaric care available to me, and I expressly assume the risk of diving in such a remote spot.

\_\_\_\_\_ 15. I understand the hazards of boat travel, including slipping or falling while on board, being struck by a boat while in the water, injuries occurring while getting on or off the boat, and other perils of the sea. By signing this release, I certify that I am fully aware of and expressly assume these and all other risks involved in boat travel.

\_\_\_\_\_ 16. IT IS THE INTENTION OF (Diver's Name) \_\_\_\_\_ BY THIS INSTRUMENT TO EXEMPT AND RELEASE CAPE FEAR DIVE CENTER LLC AND ITS BOATS (WHETHER OWNED, OPERATED, LEASED OR CHARTERED) AND ITS OWNERS, MEMBERS, EMPLOYEES, AGENTS, AND ASSIGNS AND ALL RELATED ENTITIES REFERRED TO HEREIN, WHETHER SPECIFICALLY NAMED OR NOT, FROM ALL LIABILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE, WRONGFUL DEATH CAUSED BY NEGLIGENCE OR GROSS

**NEGLIGENCE AND I ASSUME ALL RISK IN CONNECTION WITH SCUBA DIVING, SNORKELING, FREEDIVING, AND BOAT TRAVEL ACTIVITIES. I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS RELEASE BY READING IT PRIOR TO SIGNING IT ON BEHALF OF MYSELF, MY CHILD, OR MY HEIRS.**

**If you are reading this release before your arrival at Carolina Beach, please do not sign the release until the actual day that you are diving with us.**

<b>Signature of Diver</b>	<b>Date</b>	<b>Signature of Parent/Guardian</b>	<b>Date</b>
Day 1 _____	_____	_____	_____
Day 2 _____	_____	_____	_____
Day3 _____	_____	_____	_____
Day4 _____	_____	_____	_____
Day5 _____	_____	_____	_____
Day6 _____	_____	_____	_____

**PRINT NAME:** \_\_\_\_\_

**Certifying Agency** \_\_\_\_\_ **Highest Level** \_\_\_\_\_ **No. Dives** \_\_\_\_\_

**Date of last dive:** \_\_\_\_\_ **No. of dives greater than 100 ft.** \_\_\_\_\_

**Address** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**RENTAL GEAR: Weights** \_\_\_\_\_ **lbs. Belt** \_\_\_\_\_ **Tanks** \_\_\_\_\_

**Other rental gear:**

**Rental Gear Returned:** \_\_\_\_\_ **(staff)**