

20th ANNUAL OPERATION CLEAN SWEEP
SATURDAY, August 28, 2010

DIVERS' ASSUMPTION OF RISK AND RELEASE OF LIABILITY

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I, _____, do hereby state: (Complete either part A **and** C, or part B **and** C)

Part A

I am not a certified diver. I will perform only shore support to Operation Clean Sweep.

Signature

Date

Initial

_____ I am in good health and have no knowledge of any medical problems which might impair my safety while diving or performing shore work, but I also understand that scuba diving and/or lifting heavy objects is a physically strenuous activity and that I may be exerting myself during this event. If I am injured as a result of my actions, including heart attack, panic, hyperventilation, etc., I expressly accept the risk of said injuries and will not hold any of the released parties responsible for the same.

Part B

I am a certified scuba diver. I have been trained in the proper use of scuba diving equipment through:

(Agency name)

(Date certified)

I understand that even if I follow all appropriate dive safety practices, there still remains some risk of my sustaining decompression sickness, embolism, or other hyperbaric injuries, and I expressly accept the risk of injury resulting from my participation in Operation Clean Sweep.

Signature

Date

Initial

_____ I understand that scuba diving is an inherently dangerous activity. I further understand that for my safety and the safety of others, I must adhere to the following:

_____ I am aware of the unique features of the dive site, and I understand that I am responsible for having any questions relating to local conditions of features of the dive site answered prior to entering the water.

_____ I am aware that I should never dive in conditions in which I do not feel comfortable or in conditions that exceed my training or physical ability.

_____ I can properly and safely use the appropriate scuba equipment and can recognize when such equipment is unsafe and malfunctioning.

_____ I am in good health and have no knowledge of any medical problems which might impair my safety while diving or performing shore work, but I also understand that scuba diving and/or lifting heavy objects is a physically strenuous activity and that I may be exerting myself during this event. If I am injured as a result of my actions, including heart attack, panic, hyperventilation, etc., I expressly accept the risk of said injuries and will not hold any of the released parties responsible for the same.

At all times during Operation Clean Sweep:

_____ I will dive with a buoyancy device that has a power inflation system, a depth gauge, a submersible pressure gauge and a timing device, or a dive computer.

_____ I will adjust the weights to maintain mutual buoyancy with no air in my buoyancy control device at the surface of the water and position weights to keep the quick release buckle centered in front of me and accessible at all times.

_____ I will surface with at least 300 psi in my air tank and never remain underwater until my air supply is exhausted.

_____ I understand the purpose and importance of these safety practices and my responsibility to adhere to them. I am aware of the risks inherent in the sport of skin and scuba diving that cannot be completely eliminated, and I accept these risks.

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Part C

RELEASE OF LIABILITY

I agree to a full and complete release of my rights to sue or take any legal action, in law or in equity, against OPERATION CLEAN SWEEP or the SAN DIEGO PORT TENANTS' ASSOCIATION. Further, I agree to hold their employees, agents, affiliates, members, attorneys, and sponsors, harmless from any and all responsibility or liability for any and all bodily injuries, property damage, or wrongful death sustained by me or others. I agree not to make nor pursue any claim against any of the abovementioned parties for injuries or damages sustained by me or others, whether it arises or results from my own or any other negligence or other liability, whether the injuries occur on the docks, in the water, on marina property, or upon entering or exiting the water for scuba diving or skin diving purposes.

I am fully aware that diving with compressed air is an inherently dangerous activity that involves a high level of risk, and that injury or death can occur. I further agree that if I am involved in a medical emergency that may require evacuation and treatment, including a hyperbolic chamber; I am responsible for all associated costs and expenses of such evacuation and treatment.

I HAVE READ THIS RELEASE AGREEMENT, UNDERSTAND IT, AND AGREE TO BE BOUND BY IT.

Signature: _____ Date: _____

Printed Name: _____

Signature of parent or guardian if diver is a minor: _____ Date: _____

Printed Name of Parent or Guardian: _____

Street address: _____

City: _____ State: _____ Zip: _____ Tel. No.: _____

Company Name: _____

VOLUNTEER T-SHIRT SIZE _____