

Canadian Sport Divers Inc.

MEMBERSHIP RENEWAL FORM

Belleville, Ontario, Canada

PERSONAL INFORMATION

Name: _____ Phone Number(s): _____
Address: _____ Res: (____) _____
City: _____ Cell: (____) _____
Province: _____ Postal Code _____ Bus: (____) _____
Email _____ Date of Birth: _____

Would you like your contact information (Name, Residence Phone Number and Email Address) to be made available to other club members? No Yes

DIVER INFORMATION

Highest level of certification: _____
C-Card number for highest level of certification: _____
Certification Agency: (PADI, NAUI etc.) _____ Year Certified: _____
Specialty Courses Taken: _____
First Aid: No Yes Year _____ C.P.R.: No Yes Year _____
How many dives did you do last season? _____

MEDICAL INFORMATION

Health Card Number: _____
Medical Problems: (i.e. allergies) _____
Emergency Contacts: (Please provide one contact, if possible, that isn't a diver)
Name: _____ Phone Number: _____ Relationship: _____
Name: _____ Phone Number _____ Relationship: _____

MEMBERSHIP INFORMATION

Basic Single Membership \$65.00 _____
Basic Household Membership (includes 2 members) \$110.00 _____
Additional Household Members _____ @ \$50.00 = _____

Note: Household members must reside at the same address!

Total _____

MEMBERSHIP AGREEMENT

Have You 1. Read, understood and agree to abide by all club rules and guidelines as attached.
2. Carefully read, understood, dated, signed, initialed (paragraph 2) and had witnessed the club waiver form on the second page of this membership form.

Signature: _____ Date: _____

Release Form

Canadian Sport Divers Inc.

Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement

By signing this document you will waive certain legal rights, including the right to sue

Please read carefully

Name..... Date of Birth.....
Last / First / Initial Month / Day / Year

Address.....

To: Canadian Sport Divers and their Directors, Officers, Representatives, Agents and Volunteers (herein the "Releasees")

Assumption of Risks

I am aware that participation in scuba activities involves many inherent risks, dangers and hazards including but not limited to: boarding, travelling on and disembarking from dive tenders, changing weather, water and subsurface conditions, equipment malfunction or failure, harmful or dangerous marine life, physiological and psychological hazards related to underwater diving, failure to dive safely or within one's own ability, negligence of other divers and negligence on the part of the Releasees or its staff. I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage or loss resulting therefrom.

Release of Liability, Waiver of Claims and Indemnity Agreement

In consideration of the Releasees permitting me to participate in scuba activities and permitting my presence on or use of its equipment or other facilities (hereafter referred to as the Diving Facilities) I hereby agree as follows:

1. TO WAIVE ANY AND ALL CLAIMS that I may have in the future against the Releasees.
2. To RELEASE THE RELEASEES from any and all liability for any loss, damage, injury or expense that I may suffer or that my next of kin may suffer as a result of my use of or my presence on the diving facilities due to any cause whatsoever INCLUDING NEGLIGENCE OR BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY DUTY OF CARE AND/OR BREACH OF THE OCCUPIER'S LIABILITY ACT, R.S.O. 1990 c. O. 2 ON THE PART OF THE RELEASEES;
Initial here.....
3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage or personal injury sustained by any third party resulting from my use of or presence on the diving facilities: this Agreement shall be effective and binding upon heirs, next of kin, executors, administrators and assigns, in the event of my death or incapacity.

In entering into this Agreement I am not relying on any oral or written representations or statements made by the Releasees, other than what is set forth in this Agreement. This Agreement shall be governed by and interpreted in accordance with the laws of Ontario.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

Signed this.....day of.....,20
Signature of Participant

Witness
Signature of Parent or Guardian if Applicant is under 18 years of age

.....
Please Print Parent or Guardians Name Clearly

THIS AGREEMENT MUST BE COMPLETED IN FULL, DATED, SIGNED, INITIALLED (PARAGRAPH 2) AND WITNESSED BEFORE PARTICIPATION IN DIVING ACTIVITES WILL BE ALLOWED.