

RELEASE AND WAIVER

I, the undersigned, for and in consideration of the granting of permission by East Carolina University, for said undersigned to receive certification as outlined in the ECU Diving Manual and to engage in diving under the auspices of East Carolina University hereby hold(s) harmless and release(s) and forever discharge(s) East Carolina University, the Board of Trustees, the Diving Safety Control Board, the Diving Officer, their designee(s), and all of The Administrators' agents, officers, assistants, and employees, either in their individual capacities or by reason of their relationship to East Carolina University, and their successors, from any and all claims and demands whatsoever, which the undersigned and any of them, and the heirs, representatives, executors and administrators thereof, or any other persons acting on the behalf, or on the behalf of their respective agents, have or may have against East Carolina University, or any or all of the above mentioned persons or their successors, by reason of any accident, illness, or death, or other consequences arising or resulting directly or indirectly from participating in diving under the auspices of East Carolina University, and occurring during said participation, or at any time subsequent thereto, excepting such injuries caused solely by gross negligence or willful misconduct.

I understand that diving may expose me to certain risks of injury or death and I freely and voluntarily assume any and all risks of injury, including death, which might result from my participation in this activity. I understand that the dangers and risks of participating in diving and/or the activities associated with the diving program include, but are not limited to, death, drowning, near drowning, decompression sickness, arterial gas embolism, pneumothorax, barotrauma of air-containing spaces of the head, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system and serious injury or impairment to other aspects of my body, general health and well-being.

I the undersigned hereby affirm that I have the prudence, judgment, emotional stability, physical fitness, physical ability and/or skill level to participate safely in diving activities.

I agree to follow the rules and regulations applicable to the activity I am participating in. I agree to follow all applicable directions of the individual in charge of the activity I am participating in.

I understand that I am required to obtain personal medical insurance, either a general policy which covers diving accidents or a general policy and a policy designed specifically for diving related injuries, prior to my participation in any activity associated with diving. I understand that I must provide proof of this (these) policy(s) to the Diving Safety Office prior to my participation in any activities associated with diving and that I must maintain this (these) policy(s) throughout my participation in any activities associated with diving under ECU auspices. I understand that the purchase of personal medical insurance is my responsibility, and that the cost for any medical treatment I might require as a result of my or arising out of participation in any aspect of any program associated with East Carolina University is my responsibility.

I the undersigned hereby acknowledges that I have read the ECU Diving Manual and agree to comply with the regulations of this manual and those of governmental subdivisions not in conflict with this manual.

Dated this _____ day of _____ 20__

Witness _____

Please print and sign your name

Witness _____

_____ Date Received

Signature of Diving Safety Officer