

LIABILITY RELEASE AND ASSUMPTION OF RISK

This form is for diving candidates applying for training or evaluation to enter the NOAA Diving Program who are not currently full time employees of NOAA or any other government agency.

I, _____, am about to participate in a training or evaluation program sponsored by the National Oceanic and Atmospheric Administration (NOAA) Diving Program described as follows: _____, entirely upon my own initiative, risk, and responsibility.

- I am aware of the inherent risks and hazards associated with diving, including, but not limited to, barotrauma, lung over-expansion injuries, decompression sickness, and drowning.
- I understand that diving exposes my body to increased pressure and that I may be injured as a result of participation in such activities despite following appropriate practices and adhering to established decompression tables and procedures.
- I also understand that diving is a physically strenuous activity and that I will be exerting myself during this activity and that if I am injured as a direct or indirect result of exposure to hyperbaric pressures that I assume the risk of said injuries and that I will not hold the released parties responsible for the same.
- I declare that I am in good mental and physical condition for diving, and that I am not under the influence of any drugs that are contradictory to diving. If I am taking medication, I declare that I have consulted with a physician and have approval to dive while under the influence of such medication/drugs.
- In consideration of being allowed to participate in this activity, I hereby personally assume all risks in connection with any dive(s) for any harm, injury, damage or death that may befall me, including all risks connected therewith, whether foreseen or unforeseen. I further save and hold harmless said activity and NOAA, and any of its employees, from any demand, claim or lawsuit for personal injury, property damage, or wrongful death, by me, my family, heirs, executors, representatives, administrators and assigns, arising out of my participation in this activity.
- I further declare that I am of lawful age and legally competent to sign this liability release. I hereby affirm that I have read this liability release and that I fully understand its contents.

CANDIDATE DIVER NAME (PRINTED)

CANDIDATE DIVER SIGNATURE

DATE