

Center for Coastal Marine Sciences California Polytechnic State University, Center for Coastal Marine Sciences, (805) 756-6777

CALIFORNIA POLYTECHNIC STATE UNIVERSITY SAN LUIS OBISPO (CAL POLY)

Waiver, Release and Indemnity Agreement for SCUBA Diving

For consideration of permitting (Diver/Student)	
to enroll in and participate in diving activities and/or class instruction of	of SCUBA diving at California Polytechnic
State University, San Luis Obispo (Cal Poly), National Association of Un	
instructors Jason Felton NAUI #34077	, in
the city of San Luis Obispo, county of San Luis Obispo, in the state of Ca	
(date), the undersigned hereby volu	
relinguishes any and all actions or causes of action for personal injury,	
occurring to him or her, which injury, property damage or wrongful de	
receiving instructions in said diving activity and any activities incidenta	
whenever or however such may occur. The undersigned does for him/	
administrators and assigns hereby release, waive, discharge and reling	
may hereafter arise for him/herself and for his/her estate, and agrees	•
his/her heirs, executors, administrators and assigns prosecute or prese	
damage or wrongful death against Cal Poly and instructors Jason	
or against any of its agents, servants or employees for any of said caus	
the negligence of any of said persons or organizations, or otherwise.	es of action, whether the same shall arise by
the negligence of any of said persons of organizations, of otherwise.	
IT IS THE INTENTION OF (Diver/Student)	DV SICNING THIS
• • •	, BY SIGNING THIS
DOCUMENT, TO EXEMPT AND RELIEVE THE ORGANIZATION AN	
THEIR AGENTS, SERVANTS AND EMPLOYEES, FROM LIABILITY F	
DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE. BY	SIGNING THIS DOCUMENT, THE
DIVER/STUDENT ACKNOWLEDGES THAT HE/SHE ASSUMES THE	RISK OF PERSONAL INJURY, PROPERTY
DAMAGE OR WRONGFUL DEATH UPON HIM/HERSELF.	
The undersigned, for him/herself, his/her heirs, executors, administrat	ors or assigns agrees that in the event any
claim for personal injury, property damage or wrongful death shall be	
instructors named above, he/she shall indemnify and hold them harml	
action by whomever or whenever made or presented for personal inju	
The undersigned acknowledges that he/she has read the foregoing par	
rights that he/she is giving up by signing this document. He/she furthe	
completely advised of the potential hazards and dangers incidental to	
SCUBA diving, or diving related activities.	engaging in the activity analysi matraction of
Scope diving, or diving related activities.	
Name of Mills	Name of Standard / Dantisia and
Name of Witness	Name of Student/Participant
	
Signature of Witness	Signature of Student/Participant
 Date Signed	Signature of Parent of Guardian
Date Signed	(If student is a minor)