



Oyster Point Fish and Learn Saturday May 12, 2018

As a participant of the Oyster Point Fish and Learn, I hereby agree to release and discharge the organizers, sponsors, volunteers (organizers) and other participants on behalf of myself, my spouse, my children, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that kayak fishing entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. The risks include, among other things: tidal conditions and currents, travel to remote areas, collisions with objects or watercraft, prolonged exposure to cold water, hypothermia, accidental drowning, mental anguish or trauma, illness in remote areas, exposure to back injuries, slips and falls, and rapidly changing adverse weather and water conditions.
2. I expressly agree to promise to accept and assume all of the risks existing in this activity. My participation in this is purely voluntary, and I elect to participate in spite of the risks.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless the organizers, sponsors, volunteers and other participants of this event from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity, including any such claims which alleged negligent acts or omission of the organizers.
4. I certify that I have no medical or physical condition, which could interfere with my safety while participating in these activities, or else I am willing to assume, and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
5. I understand that certain skills, abilities, and physical and mental health, and fitness are required in order to reduce the dangers involved in water activities, and I certify that I possess these skills. I agree to wear a properly fastened personal floatation device at all times while in the water.
6. I understand and agree that should emergency rescue evacuation become necessary, the expenses are my sole responsibility.
7. By signing this entry form, I acknowledge I have had sufficient opportunity to read this entire document. I have read and understand it, and I agree to be bound by its terms.

Signature _____ Date _____

Full Name _____

Address _____

City _____ State _____ Zip Code _____

Email _____