Snorkeling / Glassbottom Passenger Complete Liability Release

I UNDERSTAND THAT THERE ARE INHERENT RISKS INVOLVED WITH SNORKELING And BOATING including but not limited to: equipment failure, perils of sea, acts of other participants, adverse sea and weather conditions and I HEREBY ASSUME SUCH RISKS.

I UNDERSTAND THAT I HAVE A DUTY TO EXERCISE REASONABLE CARE FOR MY OWN SAFETY AND I AGREE TO DO SO.

I assert that I am physically to snorkel and ride on a boat and I will not hold **SOUTH FLORIDA DIVING HEADQUARTERS**, their employees, agents or other associated personnel responsible if I am injured as a result of ANY problems (medical, accidental or otherwise) which occur while snorkeling, riding on the boat or otherwise participating in the trip.

If I so desire I will be issued a floatation device for snorkeling. I agree that I will not remove or release this device at any time while snorkeling. I acknowledge that doing so will constitute a violation of safety rules and procedures for which I expressly assume the risk.

I fully understand that the involved boat has limited medical facilities and that in the event of illness or injury, appropriate medical care must be summoned by radio and treatment may be delayed until I can be transported to a proper medical facility. I agree, in advance, to these conditions.

The participating tour company / scuba company and or / boat have made no representation , implied or otherwise, that they or their staff / crew can or will perform safe rescues or render first aid. In the event I show signs of distress or call for aid , I would like assistance and will not hold **SOUTH FLORIDA DIVING HEADQUARTERS**, their crew / staff , dive boats or passengers responsible for their actions in attempting the performance of rescue or first aid.

I agree to forever discharge and release **SOUTH FLORIDA DIVING HEADQUARTERS**, their employees, agents, and owners from any and all injuries or damages. I specifically agree, on be half of myself, my heirs and assigns, to indemnify and hold harmless the released parties for any and all causes of action arising as a consequence of any actions which might occur as a consequence of my participation in any snorkeling activities, and or boating trips and / or beach parties with or involving the released parties.

I HAVE READ THIS AGREEMENT, UNDERSTAND IT, AND AGREE TO BE BOUND BY IT, FROM THE DATE OF MY SIGNATURE, FOREVER INTO THE FUTURE.

Signature	·	Date:		
Print Name		Age:		
Address	City	State	Zip	
PARENTAL CONSENT				
Parent / Guardian Name		Date	e:	
Signature				
Minors				
	Age			Age
	Age			Age
	Age			age