



# MEMBERSHIP APPLICATION

To be filled in by Crew Member:	
DATE	_____
PAID	_____
CARD ISSUED	_____

CIRCLE ONE:      **NEW HAMMER**                      **RENEWAL**

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

Primary Member

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ (HOME)      \_\_\_\_\_ (WORK)      \_\_\_\_\_ (E-mail address)

CERTIFICATION AGENCY AND LEVEL \_\_\_\_\_

- ANNUAL DUES PAID:
- \$30.00 Primary membership
  - \$40.00 Family membership (limit 2 adults, 2 children)
  - \$20.00 Student membership (must be under 21 and attending school)

DUES ARE PRORATED SEPTEMBER 1ST TO \$15.00 FOR BALANCE OF MEMBERSHIP YEAR.

**FAMILY MEMBERSHIP:** Each diving or non-diving "Family Member" must reside in the same household as the "Primary Member". All "Family Members" are entitled to participate in all activities.

**STUDENT MEMBERSHIP:** Each "Student Member" must be a full time student under the age of 21. He/She is accorded all rights and privileges of membership and may vote in all elections.

NAMES OF FAMILY MEMBERS:	CERTIFYING AGENCY:	CERT: LEVEL	BIRTHDATE
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<p><b>A MEMBERSHIP ROSTER MAY BE PROVIDED TO ALL MEMBERS. THIS ROSTER IS INTENDED FOR THE EXCLUSIVE USE OF MEMBERS ONLY. IT IS NOT TO BE SOLD, PROVIDED TO OR EXCHANGED WITH OTHER COMPANIES, ORGANIZATIONS OR INDIVIDUALS. ROSTER MAY INCLUDES NAMES, ADDRESS, PHONE NUMBERS AND E MAIL ADDRESSES OF MEMBERS.</b></p>
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<p><b>WOULD YOU LIKE TO BE INCLUDED ON THIS ROSTER? YES _____ NO _____</b></p>
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In the event of an emergency notify \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

***All members must read and sign the liability release on the reverse side of this form before being accepted for membership or participating in club events.***

## LIABILITY AGREEMENT AND EXPRESS ASSUMPTION OF RISK

All diving members must initial each section and sign the completed form in the spaces provided.

I, \_\_\_\_\_ & \_\_\_\_\_ hereby certify, acknowledge and agree to the following, each paragraph which I have initialed:

\_\_\_\_/\_\_\_\_ I am a certified Scuba Diver, trained in safe diving practices.

\_\_\_\_/\_\_\_\_ I recognize and understand that diving involves unavoidable risks and dangers, including malfunctions of equipment, risks due to environment, animal or sea life, risks due to currents and other changing conditions, all of which can result in injuries and loss of life, and I expressly assume such risks.

\_\_\_\_/\_\_\_\_ I affirm that I am in good mental and physical condition for diving, but I understand that diving is a physically strenuous activity, that I will be exerting myself when I Scuba dive or skin dive, and I expressly assume the risk of such activity.

\_\_\_\_/\_\_\_\_ I should never dive alone or with a person I have not thoroughly discussed the dive plan with and each of us has reviewed one another's diving equipment and emergency procedures.

\_\_\_\_/\_\_\_\_ I should never dive in conditions which I do not feel comfortable or exceed my physical ability, and never stay underwater until my air supply is exhausted, surfacing with at least 500 psi.

\_\_\_\_/\_\_\_\_ I should dive within the decompression limits, making all dives "no decompression" dives, have a means of monitoring my depths and time underwater.

\_\_\_\_/\_\_\_\_ I will not dive under the influence of alcohol or drugs; any medication I am taking is solely my responsibility, based upon consultation with physicians who have approved its use while diving.

\_\_\_\_/\_\_\_\_ I understand that even if I follow all of the appropriate dive practices, there is still some risk of sustaining heart attack, decompression sickness, embolism, or other hyper baric injuries, that dive trips may be conducted at locations remote, either by time, distance or both, from such hyper baric chamber and other medical attention, and I expressly assume the risk of such injuries or illnesses, and the risks involved in diving under such circumstances.

\_\_\_\_/\_\_\_\_ I understand that the PalmBeach HammerHeads may be involved in non-diving activities such as camping and skiing outings and that such activities may also include certain risks and dangers that may result injuries. I expressly assume those risks.

\_\_\_\_/\_\_\_\_ I further save and hold harmless the PalmBeach HammerHeads and their agents, assigns and representatives from any claim or lawsuit by me, my family, estate, heirs, or assigns, from all liability or responsibility whatsoever for personal injury, property damage or wrongful death however caused, including, but not limited to, the negligence of the released parties, whether passive or active.

\_\_\_\_/\_\_\_\_ I understand and agree that the PalmBeach HammerHeads will not, at any time, provide for or be responsible for, the supervision of minor children, and that such supervision will be the sole responsibility of the minor child's parent or guardian.

\_\_\_\_/\_\_\_\_ I further state that I am of lawful age and legally competent to sign this liability release, or that I have acquired written consent of my parent or guardian.

\_\_\_\_/\_\_\_\_ I understand that the terms herein are contractual and not a mere recital, and that I have signed this document of my own free act.

**I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK. I HAVE READ IT BEFORE I SIGNED IT AND UNDERSTAND I AM RELEASING THE PALMBEACH HAMMERHEADS AND IT'S OFFICERS FROM LIABILITY FOR ANY LOSSES OR INJURIES RESULTING FROM CLUB ACTIVITIES**

Members Name/s (Type or print legibly) \_\_\_\_\_ / \_\_\_\_\_

Signature/s \_\_\_\_\_ / \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian , for minors under 18 \_\_\_\_\_ Date \_\_\_\_\_