

FOR ADULT PARTICIPANTS

Metro Parks-Point Defiance Zoo & Aquarium

**EYE TO EYE SHARK DIVE PROGRAM**

**PARTICIPANT AGREEMENT TO WAIVE AND RELEASE ALL CLAIMS**

I, the undersigned, verify that I am 18 years of age or older. I make this Agreement to Waive and Release All Claims in consideration for being permitted by Metro Parks - Point Defiance Zoo & Aquarium to participate in the Eye-to-Eye Shark Dive program. I am participating in the following Eye-to-Eye program:

Non SCUBA certified **Cage** dive program.

I, for myself, my heirs, executors and assigns, waive and release any and all claims for damages for death, personal injury or loss of or damage to property against Metro Parks-Point Defiance Zoo & Aquarium and its officers, directors, employees, volunteers and other representatives which I may have or which may occur to me as a result of my participation in diving activities in the Eye-to-Eye Shark Dive program at the Metro Parks-Point Defiance Zoo & Aquarium. Furthermore, I agree not to bring any action or to permit any action to be brought against Metro Parks-Point Defiance Zoo & Aquarium or its representatives on account of loss of or damage to property or bodily injury, including death, as a result of these activities or my presence at the Metro Parks Aquarium in connection with the Eye-to-Eye Shark Dive program, whether the same shall arise by negligence or otherwise.

I understand that serious accidents occasionally occur during diving activities which can result in loss of or damage to property or bodily injury or death. I acknowledge that I may participate in training given by METRO PARKS TACOMA personnel in technical diving subjects, which may involve additional risk to me. I understand that scuba diving/snorkeling are physically strenuous activities and that I will be exerting myself during these activities and that if I am injured as a result of heart attack, panic, hyperventilation, drowning, or any other cause whatsoever, that I expressly assume the risk of said injuries and that I will hold harmless the Metro Parks Tacoma. I further understand that I will be diving with and exposed to marine life including but not limited to sharks. I understand and acknowledge that these are wild animals and their behavior cannot be predicted or controlled. I affirm that if I am injured or killed by any such marine life, regardless of the cause, I will hold harmless the Metro Parks Tacoma, including its employees, directors, officers and volunteers, arising out of my voluntary participation in this program.

\* I have read the above paragraph and expressly assume all risks associated with this activity

**INITIAL HERE** \_\_\_\_\_

I am voluntarily participating in the Eye-to-Eye Shark Dive program of my own free will with knowledge of the dangers involved and hereby agree to accept any and all risks of injury or death. It is my intention, by this agreement, to exempt and relieve METRO PARKS and its representatives from all liability for personal injury, property damage or wrongful death.

I hereby consent to the reproduction and use of my photograph or reproduction, in whole or in part, or alone or in conjunction with other photographs, sketches, cartoons, art work, motion picture film, television program, commercial, videotape and text matter at the option of the Metro Parks of Tacoma without limitation, reservation or compensation.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND THIS AGREEMENT. I AM AWARE THAT THIS IS A RELEASE OF MY LIABILITY AND A CONTRACT BETWEEN MYSELF AND METRO PARKS, AND I SIGN IT OF MY OWN FREE WILL.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_