

**KAUFMAN RECREATIONAL MANAGEMENT, INC.
AND
CLEAR SPRINGS SCUBA PARK, LLC**

PARENT OR GUARDIANS RELEASE AND INDEMNITY AGREEMENT

The undersigned, being the parent, guardian or person having the care and custody of _____ (**Minors Name**) does hereby consent that my (**son, daughter, relationship**) _____ may participate in the prescribed activities, and/or take the prescribed course in skin and/or scuba diving and participate in diving activities and in consideration of **Kaufman Recreational Management, Inc. and/or Clear Springs Scuba Park, LLC** permit (**son, daughter, relationship**) _____ to participate and enter into said property for whatever activity and/or reason, and do hereby exempt, relieve, indemnify, and save/hold harmless, and agree not to sue. **I also acknowledge an understand there are underwater, overhead environments that require advanced diving skills and agree not to allow said minor to exceed their personal diving limitations and or training.**

I understand that I may be required to execute subsequent waivers, releases, and Indemnity Agreements on an annual or other periodic basis.

In witness whereof, the undersigned has hereto set his/her hand and seal this _____ Day of _____, 20____.

GROUP LEADER PARENT/GUARDIAN SIGNATURE DATE

MINOR INFORMATION: NAME _____ DOB _____

AFFILIATION _____ CERT# _____

CSSP WITNESS: _____

THIS FORM MUST BE NOTARIZED UNLESS PARENT OR GUARDIAN IS ONSITE.

STATE OF: _____ COUNTY OF: _____

Sworn to and subscribed before me on the _____ day of _____, _____

Notary Public's Signature: _____

My Commission Expires: _____