

2017 FSDA Freedive Spearfishing State Championship

REGISTRATION & WAIVER

Must be filled out completely. Please note that there will be absolutely no refunds. Personal information (phone, Email) etc. is only for use internally by the FSDA for safety reasons. I am over the age of 18. If not, my entry in this tournament is authorized in writing by my legal guardian. I hereby acknowledge that if weather conditions turn to small craft advisories or small craft warnings, it is my responsibility to monitor weather radio and seek safe harbor if conditions warrant. I understand that the FSDA may use photographs of myself or my fish to promote spearfishing and this tournament and I agree to allow said use without compensation. I will read the rules of the tournament and I agree to abide by these rules. I hereby acknowledge that I am aware of the dangers involved in boating, breath hold diving, and spearfishing. I am aware that these activities require physical exertion and stress. I am aware that the boat captain is responsible for the safe operation of the boat and the safety of the passengers therein. I am participating in these activities with the full knowledge of and the acceptance of all the risks these activities entail and the dangers involved. I am voluntarily participating in this tournament. I willingly agree to accept the risk of injury, disability, physical and/or emotional suffering, property damage or death to others or myself. I agree that I, my survivors, beneficiaries, heirs or personal representatives, will not and may not seek any compensation, damages, legal costs or expenses, including attorney fees, from the, Florida Skin Divers Association (FSDA), the FSDA officers, the FSDA member dive clubs, the dive club officers, their members, or any FSDA individual members, all FSDA volunteers, WCC clubs and any and all sponsors and advertisers of this tournament for any injury, property damage, or death, suffered by myself or others as a result of my participation in this spearfishing tournament.

* Print Clearly or this entry will not be made. Make a Copy of the Completed Form for Your Records:

Team Name _____ Boat Name _____
FSDA TEAM ____ or GUEST TEAM ____ (Check one)

Diver #1 Team Captain _____

Address _____

Email Address _____

Phone _____

Dive Club _____ FSDA Member (circle one) Yes / No

Signature _____ Witnessed by _____ Date _____

Diver #2 _____

Address _____

Email Address _____

Phone _____

Dive Club _____ FSDA Member (circle one) Yes / No

Signature _____ Witnessed by _____ Date _____

Diver #3 _____

Address _____

Email Address _____

Phone _____

Dive Club _____ FSDA Member (circle one) Yes / No

Signature _____ Witnessed by _____ Date _____

Alternative

Diver _____

Address _____
Email Address _____
Phone _____
Dive Club _____ FSDA Member (circle one) Yes / No
Signature _____ Witnessed by _____ Date _____

FSDA Membership is **NOT** required to participate.

EARLY REGISTRATION (MAIL IN)

FSDA or Guest Team Entry postmarked before April 14, 2017 (\$200.00)
\$_____.

Mail EARLY REGISTRATION entries to:
Matthew Brueckner
908 Silver Palm Way
Apollo Beach, FL 33572

AFTER April 14, BRING ALL REGISTRATIONS TO CAPTAIN'S MEETING

FSDA or Guest Team Late Entry on or after April 15, 2017 (\$280.00)
\$_____.

Total Due \$_____

OPTIONAL (To join FSDA)

I have enclosed \$20 for each diver to join the FSDA for the year 2017 (Non Refundable)
\$_____.

Make Checks payable to: Florida Skin Divers Association