## Nauti Escape Charter Waiver and Release of Liability

	ipant Information
Name:	CD: 4
Date of Birth:	
Phone .	Number:
	Address:
I, the u	wledgment of Risks indersigned, voluntarily participate in the fishing and/or scalloping charter services provided by Escape. I acknowledge and understand that these activities involve inherent risks, including but not to:
1.	Accidents or injuries caused by boating, fishing, scalloping, swimming, or handling equipment.
2.	Unpredictable weather or water conditions.
3.	Encounters with marine life, including potentially dangerous wildlife.
4.	Slips, falls, or other injuries while aboard the vessel or in the water.
	rstand that participation in these activities is entirely voluntary and that I am responsible for my afety and well-being during the charter.
In conso	sideration of being allowed to participate, I hereby release and hold harmless Nauti Escape, its s, employees, agents, and affiliates from any and all liability, claims, or causes of action arising out elated to any loss, damage, injury, or death that may occur during my participation in the charter, less of fault.
I confi	al Authorization rm that I am in good health and physically capable of participating in the activities offered by Nauti e. I acknowledge that I have disclosed any relevant medical conditions to the captain or crew.
Photog	graphy Consent (Optional)
	nsent to Nauti Escape using photos or videos of me from the charter for promotional purposes.  not consent to the use of my photos or videos for promotional purposes.
By sign	ment to Terms ning this waiver, I confirm that I have read and fully understand its contents. I agree to the terms arily and acknowledge that this document is legally binding.
Signatu	ure of Participant ure:
For Pa Parent/ Signatu	rrticipants Under 18 Years of Age  /Guardian Name:  ure of Parent/Guardian: