

# SEAS Monmouth Release of Liability

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

**The undersigned recognizes that sailing involves certain inherent risks, and agrees to hold harmless and release from liability SEAS Monmouth and/or its Officers, Instructors and Members for any injuries or damages suffered. I/We also understand that no alcoholic beverages are permitted unless and until the boat is back at the dock at the end of the sail.**

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

If the individual named above is under 18 years of age, this release must also be signed by a parent or guardian:

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

Relationship: \_\_\_\_\_