



NantucketsUrfari.com ★ 1 Essex Road Nantucket, MA 02554 ★ 508.228.1235

Name: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_
State: \_\_\_\_\_ Zip: \_\_\_\_\_
Phone: \_\_\_\_\_
Cell Phone: \_\_\_\_\_
Email: \_\_\_\_\_
Birth Date: \_\_\_\_\_ Sex: \_\_\_\_\_
Session Attending: \_\_\_\_\_

Session Date:
Age:
Parents name:
Deposit:
Balance:
Allergies:
Photo release:
Number in party:

Do not write in box Nantucket sUrfari use only

Names of others attending with you: \_\_\_\_\_

Emergency Contact Info

Name 1: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name 2: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Things we need to know to assist us in helping you get the most out of your session:

Swimming Ability and Water Knowledge (check which applies to you... be honest!)

Basic I feel comfortable in the water can swim 100-200 yards without stopping.

Intermediate I can identify rip currents and undertow from the shore and know what to do to get out if I am in one.
I can comfortably swim 200-300 yards without stopping.

Advanced I am a fish with the ability to live on dry land

Yes No Have you ever had any experiences during your lifetime that have left you feeling timid or uncomfortable with the ocean? If yes please explain.

How would you rate you surfing ability? Never surfed Beginner Intermediate
Advanced Pro (should be on tour)

What type of board do you normally surf? \_\_\_\_\_

Yes No Are you planning on bringing your own surfboard? Yes No Your own wetsuit?

Yes No Do you have any injuries or physical ailments (ie: back, shoulder, knee, neck etc.) If yes please explain.

Do you have any food allergies or other allergies we need to know about? \_\_\_\_\_

Are you currently taking any medications? If yes please list. \_\_\_\_\_

Yes No Have you attended a Nantucket sUrfari session before? If yes when? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Wetsuit sizing (circle one) **Mens** XS S M L XL XXL **Womens** 4 6 8 10 12 14 **Kids** 6 8 10 12 14 16

Height \_\_\_\_\_ Weight \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Right to Photograph: By signing this agreement, I hereby give my consent and approval to Nantucket sUrfari/Christian del Rosario that they shall have the right, without obtaining my further approval, to photograph, take motion pictures, televise, or reproduce in any manner or through any media throughout the world, images of myself, my child and my legal guardians. Nantucket sUrfari/Christian del Rosario shall have the right to display, use, sell or license any such pictures in whole or in part, or other reproduction for any purposes commercial or otherwise without monetary compensation to myself, my child or my legal guardian. All images and video footage taken as a result of participation in Nantucket sUrfari will become the property of Nantucket sUrfari/Christian del Rosario. I understand that a photo is included in my session price and if I check "No" I am not entitled to a refund of any kind but I am refusing to utilize the photo service included in my session.

Yes \_\_\_\_\_ No \_\_\_\_\_ I verify that I am in good health and am fully capable of participating in any and all strenuous activities associated with any Nantucket sUrfari. I fully understand that each Nantucket sUrfari participant must be a competent swimmer and acknowledge that I do qualify.

\*\*\* Please attach Medical Forms signed by a doctor within the past two years \*\*\*

Yes \_\_\_\_\_ No \_\_\_\_\_ I understand that all Nantucket sUrfari attendees and legal guardians of attendees under 18 must return a signed "Waiver of Liability and Acknowledgement Form" with this registration form and prior to enrollment or participation in any Nantucket sUrfari activities.

Payment: 50% of the session fee is due upon registration. Session fees are due in full upon arrival the first day of the session. Nonpayment of your balance constitutes as cancellation and our Cancellation policy applies.

Sign below confirming that you have read, understand and agree to be bound by the terms of this entire document, the Nantucket sUrfari Cancellation Policy and the Participant Waiver of Liability and Acknowledgement Form.

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

**PARENTS OR LEGAL GURADIAN OF ANY PARTICIPANT UNDER THE AGE OF 18**

All forms must be completed and signed by the participant's legal guardian. A copy of the legal guardians ID must accompany the registration form and Participant Waiver of Liability and Acknowledgement Form.

Name of participant \_\_\_\_\_

Name of legal guardian \_\_\_\_\_

Legal relation to participant \_\_\_\_\_

Signature of legal guardian \_\_\_\_\_ Date \_\_\_\_\_

## PARTICIPANT AGREEMENT, RELEASE AND ASSUMPTION OF RISK

In consideration of the services of Nantucket sUrfari, their agents, owners, officers, volunteers, participants, employees and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "NS"). I hereby agree to release, indemnify and discharge NS on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in a surfing clinic entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

**The risks include among other things:** Being hit by the board, other surfers or their boards which could result in cuts, bruises, or abrasions, and concussions; hitting the bottom of the ocean; sprains, strains, broken bones paralysis, even death; exhaustion, dehydration, sunburn; exposure to poisonous and/or carnivorous sea creatures; and accidental drowning.

Furthermore, NS employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They might misjudge the weather or other environmental conditions. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
3. I hereby voluntarily release, forever discharge and agree to indemnify and hold harmless NS from any and all claims, demands or causes of action, which are in any way connected with my participation in this activity or my use of NS's equipment or facilities, **including any such claims which allege negligent acts or omissions of NS.**
4. Should NS or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
6. In the event that I file a lawsuit against NS, I agree to do so solely in the state of Massachusetts, and I further agree that the substantive law of Massachusetts shall apply in that action without regard to the conflict of law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining document shall remain in full force and effect.

**By signing this document, I acknowledge that is anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against NS on the basis of any claim from which I have released them herein.**

**I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.**

Signature of Participant \_\_\_\_\_ Print Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Date \_\_\_\_\_

### PARENT'S OR GUARDIAN'S ADDITIONAL INDEMNIFICATION (Must be completed for participants under the age of 18)

In consideration of \_\_\_\_\_ (print minor's name) ("Minor") being permitted by NS to participate in its activities and to use its equipment and facilities, I further agree to indemnify and hold harmless NS from any and all claims which are brought by, or on behalf of Minor, and which are in any way connected with such use or participation by Minor.

Parent or Guardian Signature \_\_\_\_\_



## **You can pay by Check or Credit Card**

### **Check**

Please make checks payable to Nantucket sUrfari.

### **Credit Card Authorization**

Name as it appears on card: \_\_\_\_\_

Type of Card (check one):    Visa    Mastercard

Card Number: \_\_\_\_\_

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

VCode (last 3 numbers on back near signature): \_\_\_\_\_

Billing Address: \_\_\_\_\_

Payment Amount: \_\_\_\_\_

I authorize Nantucket sUrfari to charge my credit card listed above for the amount listed.

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

Send registration forms, waiver and payment (a check or this form completed) to:

**Nantucket sUrfari  
1 Essex Road  
Nantucket, MA 02554**