HONG KONG REEF CHECK 2018

Registrati	
Please complete in <u>BLOCK LETTERS</u>	(For Official Use Only)
I, Dr /Mr / Mrs / Ms / Miss	(Name of Team Leader)
wish to form a team for Hong Kong Reef Check 2018.	
Name of Organization :	Name of Team :
Number of Team Members : (preferably 8 – 12 divers)	Team Scientist (if available) :
Tel: (Office)	Fax :
(Mobile)	Email :
Signature : Experience in the previous Reef Check: Yes/No (If yes, please indicate year and survey site below)	
<u>Year</u>	Site
UKDC 2019 is associated by Assistant Fishering 10	Sensemution Department and Deef Cheels Frend d
HKRC 2018 is organized by Agriculture, Fisheries and C Please submit this form and all liability releases by mail ,	-
by mail Ms. WONG Nga-wing	<u>by fax</u> 2377 4427

Agriculture, Fisheries and Conservation Department by email mar_con_east @afcd.gov.hk

The successful registered teams will be notified by email before **30 May 2018**.

Marine Conservation Inspector

7/F Cheung Sha Wan Government Offices

303 Cheung Sha Wan Road, Kowloon

Liability Release Signed by each Team member

I acknowledge that Reef Check is a volunteer program. I recognize that I do not have to participate. I acknowledge that I have chosen to follow the Reef Check survey methodology because it provides one suitable way of collecting scientific information, and not because it minimizes any of the risks of SCUBA diving. I recognize that SCUBA diving is an inherently risky activity and I expressly assume all risk associated with SCUBA diving in any way affiliated with Reef Check. Moreover, I hereby release and hold Reef Check harmless for any and all negligent acts in any way related to Reef Check I have chosen to do this volunteer work of my own free will for the purpose of activities. contributing to science and coral reef conservation and I agree that I, and only I, shall be responsible for my safety, and any injuries I may sustain. I agree that I will not hold liable or responsible Gregor Hodgson, the Institute of the Environment, University of California or any personnel associated with any of the above, whether employees, agents, independent contractors, team leaders or other volunteers. I absolve all of them from any responsibility for my safety or any injuries which I may suffer in the process of following the Reef Check survey methodology, or any deviation from it.

Signature:	Date:
Full name (in block letters):	
Team name (in block letters):	