



DELAWARE CENTER FOR THE
INLAND BAYS
Research. Educate. Restore.

2019 Program Year

Oyster Gardening Registration Form

Name: _____

Mailing Address: _____

Email address: _____

Phone #: _____

Location of gear: Check here if same as above: _____

IN CONSIDERATION of being given the opportunity to participate in Oyster Gardening activities sponsored and/or conducted by the Delaware Center for the Inland Bays, Inc., I hereby agree to follow the suggested methodologies for shellfish culture. In addition, I agree to return to the Delaware Center for the Inland Bays upon completion of the project all equipment, materials and supplies provided.

In addition, I HEREBY RELEASE discharge, and covenant not to sue the Delaware Center for the Inland Bays, their administrators, directors, agents, officers, volunteers and employees, and other participants, activity organizers, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which activities take place (each considered one of the releases herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise, including injury resulting from participation in Oyster Gardening activities; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS the Delaware Center for the Inland Bays from any litigation expense, attorney fees, loss liability, damage, or cost which may incur as a result of such a claim.

I UNDERSTAND THAT SHELLFISH RAISED IN THE OYSTER GARDENING PROGRAM ARE NOT INTENDED FOR HUMAN CONSUMPTION and are the sole property of the Delaware Center for the Inland Bays.

_____ (initial)

Signature _____ Date: _____