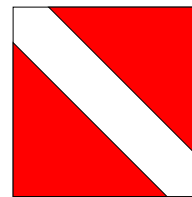




Dive Safety Office  
 Louisiana Universities Marine Consortium  
 8124 Hwy. 56, Chauvin Louisiana 70344;  
 Voice: (985) 851-2834, Fax: (985) 851-2874  
 email: [divesafety@lumcon.edu](mailto:divesafety@lumcon.edu),  
[www.lumcon.edu/diveprogram](http://www.lumcon.edu/diveprogram)



## INDEMNIFICATION AND STATEMENT OF RESPONSIBILITY OF MEMBER UNIVERSITY

In consideration of the Louisiana Universities Marine Consortium (LUMCON) providing the scientific diver named below with the opportunity to engage in scientific diving activities through training and administration of written exams, verification of SCUBA training and skills, verification of emergency safety training, and verification of swimming skills,

The \_\_\_\_\_,  
 (parent organization)

Department of \_\_\_\_\_,

(The Organization) agrees to indemnify and hold harmless LUMCON, its officers, employees, and agents, from all claims, demands and actions, including but not limited to costs, expenses and legal fees incurred in defending any such claims, demands, or actions, for damage to personal property, personal injury or death arising by reason of the negligent or other acts or omissions of the Organization or the Organization's scientific diver.

The Organization also agrees to assume full responsibility and liability for compliance with the requirements set forth above.

\_\_\_\_\_  
 Scientific Diver Date

\_\_\_\_\_  
 Department Chairperson Date  
 or Designated University Representative

**LUMCON SCIENTIFIC DIVING SAFETY OFFICER:**  
 Lora Pride  
 LUMCON  
 8124 Highway 56  
 Chauvin, LA 70344  
 Ph: (985)851-2834; Fax: (985) 851-2874; [lpride@lumcon.edu](mailto:lpride@lumcon.edu)

**IMPORTANT:** The non-employee scientific diver and department chair (or designated university representative) must complete, sign and submit this form as indicated above **PRIOR** to conducting any diving activity.