



**Mississippi Department of Marine Resources  
Grand Bay National Estuarine Research Reserve**

**RELEASE FROM LIABILITY**

**RELEASE AND WAIVER:** I release and forever discharge and hold harmless the MDMR/GBNERR and its successors and assigns from any and all liability or claims that I, or my estate, heirs and assigns, may have against the MDMR/GBNERR with respect to any bodily injury, personal injury, illness, death, or property damage that may result from my activities with MDMR/GBNERR. I UNDERSTAND AND ACKNOWLEDGE THAT THE CLAIMS BEING RELEASED HEREIN INCLUDE, WITHOUT LIMITATION, CLAIMS, IF ANY, BASED ON OR IN ANYWAY RELATED TO THE NEGLIGENCE OR GROSS NEGLIGENCE OF THE MDMR/GBNERR OR ITS OFFICERS, DIRECTORS, EMPLOYEES, OR AGENTS. I also understand that the MDMR/GBNERR does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness. I release and forever discharge the MDMR/GBNERR from any claim whatsoever which arises or may arise on account of any first aid, treatment, or service rendered in connection with my activities with MDMR/GBNERR.

**ASSUMPTION OF RISK:** I understand that the activities I perform may be hazardous and may include passage in an airplane, boat or vehicle belonging to the MDMR/GBNERR. I expressly and specifically assume the risk of injury, illness or harm in these activities and do hereby waive for myself and for my estate, heirs and assigns, any rights to claims for damages, incident to death, illness or any bodily injuries whatsoever, that may result from any activity in which I may engage while residing at the MDMR/GBNERR facilities or while conducting research, education and outreach, and stewardship projects in any manner in connection with the MDMR/GBNERR.

**INSURANCE:** I understand that the MDMR/GBNERR does not carry medical insurance for my injuries or illnesses and that I am expected to obtain my own medical or health insurance coverage.

**MISSISSIPPI LAW:** I expressly agree that this Release and Waiver of Liability is intended to be as broad and inclusive as permitted by the laws of the State of Mississippi and that it shall be governed and interpreted in accordance with the laws of the State of Mississippi. Furthermore, I expressly agree that if any one or more of the provisions contained in this Release and Waiver of Liability are held to be invalid, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Waiver and Release of Liability, which shall otherwise continue to be enforceable. Nothing herein shall be construed as conflicting with the Mississippi Tort Claims Act (Miss. Code Ann. § 11-46-1 *et seq.*) or any other applicable Mississippi statute.

Printed Name \_\_\_\_\_

Names of Minors \_\_\_\_\_  
(if any) \_\_\_\_\_

**I hereby acknowledge and agree to the terms provided above.**

DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_

WITNESSED: \_\_\_\_\_

**CONSENT TO PHOTOGRAPH, FILM, OR VIDEOTAPE  
for NON-PROFIT USE**  
(e.g. educational, or public service purposes)

Name1: \_\_\_\_\_

Name2: \_\_\_\_\_

Name3: \_\_\_\_\_

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

I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or videos of the individual(s) named above by the Mississippi Department of Marine Resources (DMR).

I also grant the right for the DMR to edit, use and reuse said products for non-profit, educational purposes including use in print, on the internet, and all other forms of media. I also hereby release the Mississippi Department of Marine Resources and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Check here if you do not wish your name (s) to be included with the product.

Signature (if 21 years of age or over):

\_\_\_\_\_

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

**AND/OR**

Signature of Parent/Guardian (if individual is under 21 years of age):

\_\_\_\_\_

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

Address of Parent/Guardian (If different from address provided above):

\_\_\_\_\_

\_\_\_\_\_