

WAIVER FORM FOR CIVILIAN ABOARD AUXILIARY FACILITY

I, _____ am aware that neither the Coast Guard nor the Coast Guard Auxiliary are to be held responsible for any claim by me while I am a passenger on Auxiliary Facility (name) _____ (FL#) _____ while it is operating on Coast Guard Patrol Auxorder Number _____ on _____ 20__.

Signature and Date

Witness

Vessel Operator

Instruct Radio Operator by landline to notify the Coast Guard that a civilian is on board and the signed waiver form is on hand.

The Auxiliary Facility will be operated by a minimum of a currently qualified Coxswain and two currently qualified Crewmembers.

NOTE: Waiver form is to be signed by the OINC prior to the beginning of the Patrol. Forward the ORIGINAL with your CG5132 to Group / SO-OP.

OINC Approval USCG Sta. Cortez Date

