



# DIVE WEST TRAVEL AGREEMENT

Registration location: GREENVILLE AVE

Destination: COZUMEL MEXICO

Dates: \_\_\_\_\_

Accommodations: \_\_\_\_\_

Air Carrier(s): \_\_\_\_\_

Dive Operator(s): \_\_\_\_\_

## **TRAVEL IS NON-REFUNDABLE**

I hereby engage Beach Dryden Scuba Enterprises, LLC d/b/a Dive West to coordinate the above trip.

I agree to pay Dive West a **NON-REFUNDABLE TRIP deposit** of \$ \_\_\_\_\_ **(Due on the reservation date)**.

The **NON-REFUNDABLE** air/hotel/transfer balance due of \$ \_\_\_\_\_ **(Due on)** \_\_\_\_\_,

The Diving balance due of \$ \_\_\_\_\_ **(Due on the night of the trip meeting)**.

I understand that Dive West will make prepaid reservations for me with the above named independent contractors, or any other contractor at the discretion of Dive West. I understand that Dive West expressly disclaims any responsibility other than coordinating arrangements with the independent contractors, to whom I agree to look for accommodations, transportation, and open water dive activity. I agree to arrange for my own diving gear, meals and refreshments, except as otherwise set forth below. I am aware that certain countries require documents indicating proof of citizenship, and I agree to provide them.

I represent that I have been duly certified by a recognized association of diving instructors, and agree that I will exercise appropriate care at all times during my diving activities, including the use and observation of proper buddy system techniques, suitable equipment, appropriate ascent and descent procedures, and no-decompression time/depth limits. I agree that I am current with diving procedures, skills and dive tables as set forth by a recognized certification agency. I acknowledge being informed that diving may be conducted at sites that are remote in time and distance from a recompression chamber and oxygen may not be available at the dive site.

I fully understand the dangers incidental to diving that may result from local hazards, physiological conditions, weather, climate, failure of equipment, limited visibility, marine life, current and surf, and I expressly assume the risk of harm to me in encountering such dangers. I agree to rely on local diving service, and not Dive West for such orientation to local conditions, such instruction and such supervision as are necessary for my diving.

I HEREBY RELEASE AND DISCHARGE DIVE WEST OF AND FROM ANY AND ALL CAUSES OF ACTION FOR PERSONAL INJURY TO MYSELF OR PROPERTY LOSS OR DAMAGE ARISING FROM ANY ACT OF NEGLIGENCE COMMITTED BY DIVE WEST EITHER NOW OR IN THE FUTURE DURING THE TRIP/DIVE TRIP MADE SUBJECT OF THIS AGREEMENT.

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**PASSPORT #** \_\_\_\_\_ **EXP DATE** \_\_\_\_\_

I agree to pick up my boat ticket at Dive West no later than. DURING TRIP MEETING OR VIA EMAIL

Any class or specialty instruction fees should be made payable to Dive West. (Not individual instructor)

**SPECIAL PROVISIONS:** \_\_\_\_\_

### **PLEASE PRINT CLEARLY: (YOUR INFORMATION MUST BE THE SAME AS YOUR PASSPORT)**

Full Legal Name \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address \_\_\_\_\_ Are you a smoker? Yes \_\_\_\_\_ No \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Diver \_\_\_\_\_ Non-Diver \_\_\_\_\_ Certifying agency \_\_\_\_\_

HM (\_\_\_\_) \_\_\_\_\_ WK (\_\_\_\_) \_\_\_\_\_ Level \_\_\_\_\_ Card # \_\_\_\_\_

E-mail address: \_\_\_\_\_ Are you under 18 years old? Yes \_\_\_\_\_ No \_\_\_\_\_

Frequent flyer number: \_\_\_\_\_ Scuba Skills Update? Yes \_\_\_\_\_ No \_\_\_\_\_

Roommate's name (if applicable): \_\_\_\_\_

If you are traveling alone, would you object to sharing a room with a member of the opposite sex? Yes\* \_\_\_\_\_ No \_\_\_\_\_

*\*If yes, please be aware that we will do our best to accommodate your request, but cannot guarantee that you will share accommodations with someone of the same sex. A private room may be available to you at an additional expense, but the availability of a private room cannot be guaranteed.*