

OFFICE USE

Charter Embark Date: _____ **Charter Number & Name:** _____
Resort Combos? YES NO **Bill Number:** _____

Please complete in full (one form for every guest):

GENERAL INFORMATION

Your Name: _____ **Date of Birth:** _____
Sex: MALE FEMALE **(Approx) Height and Weight:** _____
Nationality: _____ **Passport #** _____
Address: _____ **Country of Residence:** _____
_____ **Email Address:** _____

Are you taking out trip insurance? YES NO

If yes please state details (Dates of coverage, name of company, policy number etc):

If no, please sign the following statement:

I understand that dive liveboard trips in the Philippines will be to remote locations and that I have been advised to take out trip insurance. I am aware that trip insurance may be taken to financially cover unforeseen cancellations such as illness or weather, trip delays and/or emergencies during the trip and I have declined to take out such insurance.

Signature: _____

Please state any dietary requirements (we will advise if your request is not possible):

Have you been on a dive liveboard before? YES NO

If Yes, how many liveboard trips have you done? _____

If yes, when/where/which boat was your last liveboard: _____

In case of an emergency who should we contact?

Name: _____

Relationship to you: _____

Contact Address: _____

Contact Number: _____

Email Address: _____

MEDICAL INFORMATION

It is your responsibility to check with your personal physician to ensure that you are fit and healthy to undertake the trip and to dive; you will sign a waiver to this affect.

Do you have any medical conditions or are you taking any medication that we should be aware of? YES NO

If `yes` please provide details *and attach a doctors certificate indicating that you are fit to take this specific trip and to dive:*

DIVING INFORMATION

Are you a certified Diver? YES NO

If Yes, please complete the following;

Certification Agency: _____
(e.g. PADI, CMAS, SSI, BSAC)

Certification Level: _____
(e.g. Open Water, Advanced OW)

Approximate Numbers Of Logged Dives: _____

Date / Location of last dive: _____

How do you rate your diving ability? Beginner Novice Average Very Good Expert

Please sign the following statement:

I understand that the maximum dive depth will be 30m/100ft on any dive unless a specific exception is made to this. I further understand that to dive below 18/60ft or at night I will be asked to show either appropriate certification or experience in such diving. I will bring and dive with a dive-computer, audible and visible signaling device.

Signature _____

Do you have dive accident insurance? Yes No

If yes please state details: _____

If no, please sign the following statement:

I understand that I have been advised to take out dive insurance to cover financial loss as the result of dive accident which may be considerable if evacuation is needed from a remote location and I have declined to take out such insurance.

Signature _____

Are you certified Nitrox Diver? Yes No

If `yes` will you be using Nitrox on the charter? Yes No

A maximum 1.4 PPO2 will be used on board

If 'no' would you like to get certified on the charter? Yes No

Are you diving with a camera? Yes No

If 'yes' how would you rate your camera/picture taking? Point & Shoot Intermediate Pro

If 'no' would you like to rent a camera for this charter? Yes No

If 'yes' or 'no' would you like to receive instruction on picture taking this charter? Yes No

Are you diving with a Rebreather? Yes No

If yes, and you are bringing your own Rebreather please let us know any requirements you have for filling, tanks or sorb (we will advise if your request is not possible): _____

For Coron Wreck Diving Charter Only

On this charter we only accept divers who have

- A PADI Advanced certification (or equivalent certification with basic training in deep diving)
- A Nitrox certification
- At least twenty five logged dives, at least five of which must have been to 24m/80ft or deeper

Note: Wreck penetration is allowed with the consent of your dive guide and where ambient light is visible only. No other type of wreck penetration will be permitted regardless of your experience or certification.

Do you require any rental dive equipment for the charter? Yes No

Please note that the use of dive computers is mandatory on the Azores and every diver must have visible (e.g. signal tube) and audible (e.g. whistle) surface signaling devices.

If yes, please tick and add size where space is provided (rental equipment will be charged to your personal bill):

BCD _____ Dive Computer Booties _____ Wet Suit _____
 Regulator and SPG Dive Light Fins _____ Mask & Snorkel

Would you like to take any PADI Dive Courses during the charter? YES NO

If 'Yes', please indicate which:

PADI Advanced Open Water PADI AWARE Fish ID
 PADI Underwater Naturalist PADI Boat Diver
 PADI Night Diver PADI Drift Diver
 PADI Nitrox Diver PADI Multilevel
 PADI Underwater Digital Photography PADI Peak Performance Bouyancy

YOUR PACKAGE DETAILS:

Your selected cruise: _____

Charter Departure Date: _____

Are you staying at the resort before or after your liveboard charter? YES NO

If 'Yes', please give us details: _____

Your arrival details (dates, flight numbers, times or how you are getting to us):

Your departure details (dates, flight, etc.):

Do you require assistance with domestic travel arrangements? YES NO

TERMS & CONDITIONS:

Payments:

Groups (any number of guests that generates a free space)

1. First payment: Deposit of \$200 per person (FOC places are exempt) within 30 days of reservation. Deposits are non-refundable but may be converted to FIT (min 4 persons) bookings prior to 9 months before departure date.
2. Second Payment: 270 days (9 months) - additional non-refundable payment of \$3,500.
3. Third payment: 180 days (6 months). Additional amount to bring total payments to 40% of total package invoice. (Full charters may be reduced to minimum of 7 paying places up to 180 days with amount paid fully credited towards these places).
4. Final balance of payment: 60 days prior to departure.

Individuals/Non Groups

Deposits:

1. Deposit: 20% of charter price refundable (less bank charges) or creditable towards another trip up to 270 days (nine months).
2. Second Payment: None.
3. Third Payment: 180 days (6 months). Additional amount to bring total payments to 40% of total package invoice. Up until 180 days a charter date may still be changed with an administration fee of \$100 per person.
4. Balance of Payment: 60 days prior to departure.

Cancellation Penalty

- ❖ 271 days plus is loss of deposit.
- ❖ 270-180 days before arrival is 20% of the total package charge.
- ❖ 180-61 days before arrival is 40% of the total package charge.
- ❖ From 60 days before arrival date is 100% of the total package charge.

Azores Trip Cancellation, Curtailment or Change of Itinerary:

Cancellation or Curtailment due to weather:

If dive days are cancelled or curtailed due to weather there is no reimbursement or compensation.

If a complete trip is cancelled due to weather.

- (a) Guests may transfer to an Atlantis Resort for their stay subject to availability or;
- (b) Guests are entitled to a one off cash inconvenience refund of \$500 per person

Change of Itinerary:

Every effort will be made to follow proposed routes and dive sites. However, the final itinerary and locations are at the discretion of the Captain and these may change according to weather, safety, or other logistical issues.

Please note: Trip insurance is highly recommended

By signing this waiver, you are agreeing to the terms of the Payment, Cruise application/Waiver and Cancellation Policy.

Cruise Application / Waiver Policy:

This Cruise Application and our Charter Waiver must be fully completed, signed at all appropriate places, and received by our reservations team thirty (30) days prior to departure date. Passengers who fail to comply will be canceled and denied boarding.

For those passengers traveling on back to back charters, a Cruise Application/Waiver must be completed and signed for each trip.

If a reservation is made thirty (30) days or less prior to the charter date, completed and signed Cruise Application/Waiver must accompany full payment in accordance with the payment policies to confirm reservation.

Signature: _____

Date: _____

CONSENT TO ADMINISTER FIRST AID:

In case of a medical emergency, I _____ authorize the Captain and/or
(print name)

crew of the Atlantis Azores permission to administer first aid or get proper medical attention if necessary. I understand that the nearest operational recompression chamber may be many hours away and may require air evacuation. The time involved with boat and air transport poses additional risk to my personal safety. I voluntarily accept this additional risk and am fully prepared to pay all expenses related to evacuation and recompression chamber treatment should it be deemed necessary by myself or vessel. I hereby certify that the foregoing is true and correct.

Signature: _____

Date: _____

BOAT RULES:

I _____ understand that being on liveaboard vessel at remote locations
(print name)

implicitly involves some risk and that in order to minimize such risk to myself and fellow passengers I agree to:

- Follow directions and instructions given during the cruise orientation and each dive briefing
- Always follow the direction of the Captain and crew
- Never drink alcohol prior to diving and drink within reasonable levels at all times
- Refrain from any behavior that may endanger the crew or fellow passengers
- Smoke only in designated areas and never inside the cabins or dining/lounge areas

I further understand that flagrant disregard for these rules may mean the Captain makes arrangements for me to be removed from the boat at the earliest opportunity.

Signature: _____

Date: _____