TRAVEL AGREEMENT (One Per Person)

1 6 2		Destination	າ:		
		Dates:		To:	
	ing .	Accommod	lations:		
DIVE		Air Carrier(
INTO Zcuta	,	Dive Opera	ator(s):		
I hereby engage Dive Into S deposit of \$	cuba, Inc. to coordinate	te the above trip. I a	agree to pay l	Dive Into Scuba, Inc. a	non-refundable
Then payments of \$ amount of \$	by, Pa due	yment of \$ or no later	by than 60 days	and then the fina	al non-refundable ture.
I understand that Dive Into S contractors, or any other contractors					pendent
I understand that Dive Into S the independent contractors agree to arrange for my own certain countries require door	, to whom I agree to lo diving gear, meals ar	ook for accommoda nd refreshments, ex	tions, transpo cept as other	ortation, and open water wise set forth below. I	er dive activity. I
I represent that I have been appropriate care at all times techniques, suitable equipm agree that I am current with acknowledge being informed recompression chamber and	during my diving activent, appropriate ascer diving procedures, skill that diving may be co	rities, including the nt and descent proc lls and dive tables a onducted at sites th	use and obsectedures, and least set forth by lat are remote	ervation of proper budd no-decompression time y a recognized certifica	ly system e/depth limits. I ation agency. I
I fully understand the dange climate, failure of equipment in encountering such dange conditions, such instruction	t, limited visibility, mari	ine life, current and ocal diving service,	surf, and I ex and not Dive	pressly assume the ris	sk of harm to me
I HEREBY RELEASE AN ACTION FOR PERSONA ACT OF NEGLIGENCE (DURING THE TRIP/DIV	L INJURY TO MYSI COMMITTED BY D	ELF OR PROPER ive Into Scuba, In	CTY LOSS O. c EITHER N	R DAMAGE ARISIN IOW OR IN THE FU	G FROM ANY
Name	Siar	nature		Date	
(Please Print)					
I agree	e to pick up my ticke	t no later than one	e week befo	re departure date.	
PRICE OF TRIP IS SPECIAL PROVISIONS:				D ON DOUBLE OCCU	JPANCY.
Please Print Clearly:					
Full Legal Name				Sex: M	_ F
Address			Are you	a smoker? Yes	No
City	State	Zir	ວ		
City	_WK()	email:			
Are you under 18 years					
Diver Non-Diver _	Certifying ag	r assport no encv	Level	Card #	
Date of last dive:	Would	you like a Scuba	Skills Refres	sher? Yes No	
Roommate's name (if appl	icable):				
If you are traveling alone, wo					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.

Fax to: **972-315-3376**