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Destination: _____		Scheduled Departure Date: _____ Scheduled Return Date: _____	
Style of Trip: <input type="checkbox"/> Shore Based <input type="checkbox"/> Live Aboard <input type="checkbox"/> Other: _____		Type of Trip: <input type="checkbox"/> OVI Group <input type="checkbox"/> Individual Booking <input type="checkbox"/> Other: _____	
Trip Price: <input checked="" type="checkbox"/> \$ _____, per person, discounted for cash & Club* <input checked="" type="checkbox"/> \$ _____, pp, credit price, discounted for Club <input checked="" type="checkbox"/> Increases in taxes are not included and are estimated to be less than \$ 250.00		Other Information: _____	

TRAVEL POLICY: This application must be completed by each individual, signed and returned with the applicable deposit as outlined further on the form. Checks must be made payable to Oceanic Ventures, Inc.. Final payments are due in full, ninety (90) days prior to the departure date. On Oceanic Ventures, Inc. group trips, all travel fees paid, including deposits, are non-refundable unless the trip runs full and a suitable substitute can be found. For individual bookings and other types of travel, deposits and fees are refundable according to the refund policies of the companies (hotels, airlines, dive operators, etc.). An additional cancellation fee of twenty percent (20%) will be charged to cover the expenses of arranging the booking. Oceanic Ventures reserves the right to cancel a trip/booking due to an insufficient number of participants. Travel/Cancellation insurance is highly recommended and is available from Oceanic Ventures, Inc.. After the deposit is paid, all revisions require a \$50.00 handling fee.

Personal Information:

Name <i>(please give full name as it appears on your passport)</i>			Birth day	Nationality	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address			Passport Number	Issued at	Expiration Date
City	State	Zip	Roommate Request <i>(not guaranteed)</i>		
Mobile Telephone		Business Telephone	Room Configuration? <input type="checkbox"/> Private/Single (an extra charge will apply) <input type="checkbox"/> One Bed/Bunk <input type="checkbox"/> Two Beds/Bunks		
Diving Insurance Company & Policy Number			Dietary Request <i>(not guaranteed)</i>		
Other Health Insurance Carrier & Policy Number			Event or Celebration during the trip?		
Frequent Flyer Number <i>(include airline carrier)</i>			T-Shirt Size	Polo Shirt Size	
Other			Airline Seating Request <i>(not guaranteed)</i>		

Please attach copies of your passport, certification card, diving insurance card and your health insurance card.

Payment Information

Deposit	Due Date	Amount in US\$
Initial Deposit	At time of booking	
Intermediate Deposit		
Intermediate Deposit		
Intermediate Deposit		
Final Payment	90 Days prior to departure (1)	

(1) Final payment subject to change due to taxes, transfers, additional side trips and changes in airline pricing until ticketed (if the price includes airfare).



Web: www.oceanicventures.com
e-mail: diveSAFE@oceanicventures.com

2715 Bissonnet, Suite 302
Houston, Texas 77005
Voice: (713) 523-DIVE
Facsimile: (713) 523-6378

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Diving Experience:	Certified Diver? <input type="checkbox"/> Yes, Highest Cert. Level _____ <input type="checkbox"/> No (of course we can solve that)	Certification Info. <input checked="" type="checkbox"/> Certification Level _____ <input checked="" type="checkbox"/> Certification Number: _____ <input checked="" type="checkbox"/> Agency: _____
	Diving History? <input checked="" type="checkbox"/> Approx. Number of Dives _____ <input checked="" type="checkbox"/> Dives in past 12 months _____ <input checked="" type="checkbox"/> Date of Last Dive _____	Diving Ability? <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced <input type="checkbox"/> Expert
	Would you like to complete and dive education courses on this trip?	Do you need and special dive equipment for this trip?

Emergency Contact Information

Name: _____

Phone Number: _____

Relationship: _____

Other Number: _____

TRAVEL AND TOUR CONTRACTUAL LIABILITY RELEASE & WAIVER THIS IS A RELEASE OF YOUR RIGHTS TO SUE

1. I UNDERSTAND THAT THE PURPOSE OF SIGNING THIS DOCUMENT IS TO EXEMPT AND RELEASE OCEANIC VENTURES, INC. & OVI TECHNICAL TRAINING (HEREAFTER CALLED DIVE STORE) THEIR EMPLOYEES, AGENTS AND ASSIGNS AND TO HOLD THESE ENTITIES HARMLESS FROM ANY AND ALL LIABILITY ARISING AS A CONSEQUENCE OF THE FOLLOWING OR ANY OTHER ACT OR OMISSION ON THEIR PART, INCLUDING BUT NOT LIMITED TO, ACTIVE OR PASSIVE NEGLIGENCE.

2. By way of my signature on this contract I certify that I am a certified diver or a student diver and have been taught and understand that scuba diving is a hazardous sport. I also fully understand that scuba diving has inherent risks and dangers including, but not limited to, risks associated with equipment failure which could lead to my serious injury or death. **BY MY SIGNATURE ON THIS DOCUMENT I EXPRESSLY ASSUME THESE RISKS.** I acknowledge that I am physically fit to scuba dive or snorkel and engage in this trip. I further agree that I will not hold any of the above named individuals, persons, or entities responsible should I become injured as a result of a medical condition while I am participating in this trip, scuba diving or snorkeling. At no time during this trip will I have in my possession any illegal drugs, nor am I taking, nor have I recently taken any drugs or medications which could cause an adverse reaction as a result of combining such drugs and/or medication with scuba diving.

3. In consideration for allowing my participation in this trip, which is being offered by the dive store, I fully understand that prevailing weather conditions may cause certain modifications to the dive program. I also fully understand that the transportation or equipment made available by the resort or boat operators who are providing services to me is not the responsibility of the dive store. I also fully understand and agree that the dive store acts only on behalf of itself and itself alone in arranging this travel/trip tour. I understand the dive store is in no way responsible for any acts, errors, or omissions including active or passive negligence by any provider of transportation, equipment, dive services, hotel, tour operator, divemaster, scuba instructor, dive boat, dive boat captain and crew, or any other provider who is engaged to render any service whatsoever on this trip/tour.

4. My signature on this document affirm that I am fully aware of the dangers, risks and hazards of holding my breath while diving and the dangers associated with a rapid ascent. I certify that I am fully aware of the possibility that my equipment may malfunction during a dive which could include a free flowing regulator, stuck inflator button or unwanted inflation of my buoyancy compensator. I certify that I have been trained and know how to overcome these eventualities should they occur to me. I agree not to hold any of the individuals or entities named within this document responsible for any such act.

5. IT IS MY EXPRESS INTENTION BY WAY OF THIS INSTRUMENT AND MY SIGNATURE HEREON TO GIVE UP ALL OF MY RIGHTS TO SUE ANY INDIVIDUALS OR ENTITIES REFERRED TO WITHIN THIS DOCUMENT, WHETHER SPECIFICALLY NAMED OR NOT. FURTHERMORE IT IS MY EXPRESS INTENTION TO EXEMPT AND RELIEVE THE DIVE STORE, THEIR EMPLOYEES, AGENTS AND ASSIGNS AND TO EXPRESSLY AGREE TO INDEMNIFY AND HOLD THESE ENTITIES HARMLESS FROM ANY AND ALL LIABILITY FOR PERSONAL INJURIES, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY ANY ACTIVE OR PASSIVE NEGLIGENCE RELATED IN ANY FASHION TO MY PARTICIPATION IN THIS TRIP. I SPECIFICALLY AND EXPRESSLY ASSUME ALL RISKS IN CONNECTION WITH THIS TRIP.

6. I HAVE READ AND UNDERSTAND THE FOREGOING IN ITS ENTIRETY AND I AGREE TO THE TERMS AND CONDITIONS HEREIN AND ABOVE SET FORTH ON BEHALF OF MYSELF, MY HEIRS AND MY PERSONAL REPRESENTATIVES. I REALIZE THAT THIS DOCUMENT IS A CONTRACT.

Signature

Date

Print Name

Participants under the age of 18 must also have parent or guardian signature.

(Parent/Guardian Signature)



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Model & Property Release

By way of my signature on this document, and in consideration for allowing my participation on this trip, which is being offered by the dive store, I hereby irrevocably authorize Oceanic Ventures, Inc., Square Rig Photography, Eric V. Keibler and/or Ann Y. Keibler to use photographs of me and or my property and authorize him/(her/their and his/her/their assignees), licensees, legal representatives and transferees to use and publish (with or without my name, company name, or with a fictitious name) photographs, pictures, portraits or images herein described in any and all forms and media and in all manners including composite images or distorted representations, and the purposes of publicity, illustration, commercial art, advertising, publishing (including publishing in electronic form on CDs or internet websites), for any product or services, or other lawful uses as may be determined by the photographer or studio named here.

I further waive any and all rights to review or approve any uses of the images, any written copy or finished product. I am of full legal age or have the permission of a legal guardian and have read and fully understand the terms of this release.

Description of images: Images taken before, during or after the trip covered by this form.

Signature _____

_____ Date

_____ Print Name

I am the parent or legal guardian of the above mentioned minor and have the legal right and authority to execute the above release on behalf of the minor.

_____ (Parent/Guardian Signature)

_____ Print Name

Other Information

Are you a member of *Club Aquarius*?

☐ Yes ☐ No ☐ Tell me more

Would you like to utilize our **VIP Diver's Packing Service** (your dive equipment packed and weighed ready to go)?

☐ Yes ☐ No ☐ Tell me more

Would you like to utilize our **VIP Diver's Cleaning Service** (your dive equipment cleaned, dried and repacked)?

☐ Yes ☐ No ☐ Tell me more

Would you like to utilize our **VIP Diver's Shipping Service** (your dive equipment delivered to your destination)?

☐ Yes ☐ No ☐ Tell me more

Do you want to purchase Travel/Cancellation insurance (*unforeseen circumstances do appear, we recommend travel insurance*)?

☐ Yes ☐ No

Would you like to take a continuing education course from us on this trip? If so what would you like to take?

☐ Night Diving ☐ Boat Diving
☐ Navigation ☐ Search & Recovery
☐ Deep Diving ☐ Wreck Diving
☐ Stress Rescue ☐ U/W Photography
☐ Dry Suit ☐ _____

☐ Rebreather Course ☐ Wreck Penetration
☐ Normoxic Trimix ☐ Trimix
☐ _____

Additional Information:

