



5015 Penn Ave South Minneapolis, Minnesota 55419 (612) 925-4818

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[www.scubacenter.com](http://www.scubacenter.com)

## TRIP APPLICATION

This application must be completed by each person who registers for a Scuba Center (SC) travel program. Travelers who have been on previous SC trips will need to complete a new application for each trip. The application must be returned with a \$500 deposit per person to reserve space on a trip. Generally, final payments are due 90 days before departure. Your trip may have additional payments due between the date of your deposit and the date of your final payment. Trip cancellations are subject to a minimum \$100 cancellation fee and any refund is based on our ability to resell your space, and/or cancellation penalties of the vendors who provide travel services to Scuba Center. These include, but are not limited to, resorts, dive operators, and airlines.

Destination \_\_\_\_\_ Date of Departure \_\_\_\_\_

Mr./Ms. \_\_\_\_\_  
Name (*Please give full name*)

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_  
Home \_\_\_\_\_ Work \_\_\_\_\_

E-mail Address \_\_\_\_\_

### PASSPORT INFORMATION

Passport # \_\_\_\_\_ Name exactly as it appears on your passport \_\_\_\_\_

Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_ Passport Expiration Date \_\_\_\_\_

In the event of an emergency, please list the person we may contact on your behalf:

Name \_\_\_\_\_ Area Code/Phone \_\_\_\_\_

Street Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

What source led you to this SCUBA CENTER Adventure?

\_\_\_\_\_  
Which SCUBA certification do you hold?

\_\_\_\_\_  
Please give a brief summary of your diving experience.

\_\_\_\_\_  
Do you have any medical history, medical condition or medical impairment which would make diving dangerous, hazardous, or expose you to exceptional risk?

\_\_\_\_\_  
Smoker Non-Smoker Any special dietary requests? \_\_\_\_\_

If you are traveling alone and wish to share a room, would you object to sharing one with a member of the opposite sex? Yes No

We will do our best to accommodate your request, but cannot guarantee that you will share a accommodations with someone of the same sex. You can only be guaranteed a private room if you indicate your willingness to cover the expense of a single room I understand and agree to pay the cost of a single supplement.

\_\_\_\_\_  
Signature Date

HAVE YOU COMPLETED ALL BLANKS? THE INFORMATION REQUESTED ON THIS FORM IS ESSENTIAL TO THE PROCESSING YOUR APPLICATION.

\_\_\_\_\_  
**GENERAL CONDITIONS**

**General Release, Assumption of Risk, Waiver of Liability and Indemnity Agreement**

**NOTE: Trip cancellation insurance may be purchased through Scuba Center or any travel agent for a nominal premium. We urge you to purchase such insurance and read the policy carefully. Information is available at Scuba Center.**

**Agreement of Liability and Responsibility and Release**

I hereby understand and agree to the above General Conditions and to the following terms and conditions of participating in a Scuba Center program.

- 1. Liability and Release: In traveling to and from any dive destination and during the**

trip itself, there are certain risks and dangers, including but not limited to hazards arising from the forces of nature, from living on board ship, from accident or illness without medical facilities, and from travel itself. In consideration of, and as part payment for, the right to participate in this trip, I assume all risks of harm, injury and damage to myself and my personal property arising out of my preparation for and participation in this trip. I agree to hold Scuba Center harmless from, and to indemnify it against, any and all claims, liabilities, obligations, and causes of action of whatever kind or nature for injury to me, of my death and for any and all damage to, or destruction of my personal property, resulting from any and all negligent acts or omissions of Scuba Center or its employees, agents, contractors or invitees.

2. **Suppliers of Services:** Scuba Center is performing a service by making known to potential participants worthwhile scuba trips. But, Scuba Center is acting independently and has no business association as partner or joint venture with any boat owner, resort, hotel, carrier or other supplier of sail or other transportation or other services. Any and all claims for inadequate or non-performance of such services may be made against the supplier of those services but shall not be made against Scuba Center.

3. All programs are subject to change as to date, itinerary and price. Substitutions on a given program are not considered cancellation by Scuba Center. No refunds can be made for cancelled diving arrangements due to adverse weather, or for substitution of facilities and/or equipment, or for minor inconvenience.

Applicant declares that Applicant has read and understands the contents hereof and voluntarily signs the General Release, Assumption or Risk, Waiver of Liability and Indemnity Agreement.

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Date

Signature

Send or fax application to:

**SCUBA CENTER DIVE TRAVEL, 5015 Penn Avenue South, Minneapolis, MN 55419**

Phone: (612) 925-4818 FAX: (612) 925-5933