



## Trip Reservation Form

## Bluewater Scuba Dive Tours

Complete one form per traveler

Please write legibly.

**Yes, I want to go to:** \_\_\_\_\_ **Dates:** \_\_\_\_\_

Full Name on Passport: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Mailing Address City State Zip

Best Contact Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ E-Mail: \_\_\_\_\_

Passport #: \_\_\_\_\_ Exp. Date \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Diver Agency: \_\_\_\_\_ Certification Level: \_\_\_\_\_ Approx. # of Dives: \_\_\_\_\_

Roommate Requested: Yes \_\_\_ No \_\_\_ Smoker: Yes \_\_\_ No \_\_\_ Single Occupancy Requested: \_\_\_\_\_

Dive Insurance Company: \_\_\_\_\_ Member # \_\_\_\_\_ Need Info? \_\_\_\_\_

Do you have any medical history, medical condition, or physical impairment that would make traveling or diving related activities dangerous, hazardous, or expose you to exceptional risk? Yes \_\_\_ No \_\_\_

If "Yes", please explain here: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Contact Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

What rental equipment will you need, if any? \_\_\_\_\_

On this trip, would you like to complete any advanced or specialty training? Yes \_\_\_ No \_\_\_

If "Yes", what courses are you interested in? \_\_\_\_\_

**Note:** All trip quotes are based on cash prices. Booking fees may apply for payments by credit card. Due to fluctuations in airfares, fuel charges, taxes, etc., no trip quote can be guaranteed. Any changes by the customer in dates, accommodations, flights, or other aspects of the trip can affect the trip price and/or result in added administrative charges.

**Please read sign and date the "General Release, Assumption of Risk, Waiver of Liability, and Indemnity Agreement" form.**

Trip payments are all non-refundable, non-cancellable, and non-transferable. To protect yourself against pre-trip cancellation or trip travel emergencies, we strongly recommend you purchase Trip Cancellation Insurance. A policy description and price quote is available at Bluewater Scuba or online through a link in the travel section of our website.

I have received information about Trip Cancellation Insurance: \_\_\_\_\_

Signature

Deposit Paid: \_\_\_\_\_ Cash \_\_\_ Check # \_\_\_\_\_ M/C\* \_\_\_ VISA\* \_\_\_

I agree to pay the above deposit amount (signature): \_\_\_\_\_

If Credit Card, card #: \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code\*: \_\_\_\_\_

\* You may call in security code if desired.

Billing Address: \_\_\_\_\_  
Billing Address City State Zip

***\*Note: Credit card payments will require a 3% administrative surcharge.***

You may fax form to: (615) 771-0016  
Or mail to: Bluewater Scuba

or Scan and E-mail to: [steve@bluewaterscuba.com](mailto:steve@bluewaterscuba.com)  
320 Mallory Station Rd. Franklin, TN. 37067