

DOCUMENT CHECK-LIST

All Documents in this Packet *MUST BE COMPLETED* and Returned to the Group Leader along with your Trip Deposit in order to Reserve your Space.

Please ask for a Copy of these Documents when you Reserve Your Space

DOCUMENT CHECK-LIST: Traveler's Name: _____

Client Contact & Passport Info (Pg. #2) – Please fill out in *FULL*. Include all Contact information including an e-mail address to send Trip updates. Your Name in the Passport Section must be filled out EXACTLY as it shows on your Passport. Be aware of your passport's expiration date – Will you still be current for 6 Months when we leave?

Payment Schedule (Pg. #3) – Please complete your form as follows:

DIVE TRIP: MALDIVES DATE: 10/18/16 THROUGH 10/31/16

LEADERS: Jeff Smith/Fred Colburn TRAVEL AGENT: World of Diving

DEPOSIT AMOUNT: \$1,299.00 per Person Lower Deck
 \$1,499.00 Middle Deck
 \$1,699.00 Upper Deck

Also include your Trip Deposit made out to “Travel Agent” *OR* Complete the Credit Card Authorization Section. Note: the Full Deposit PLUS any other payments shown Due at Time of signing are Due with this Packet.

Optional Travel Insurance (Pg. #4) – Please read and Select opting in or out for Travel insurance Coverage (Check Only One Option), then sign the Document.

PADI Travel and Excursion Liability Release (Pg. #5) – Please read and Sign.

(RETURN THIS PACKET TO YOUR GROUP LEADER WITH YOUR DEPOSIT)

CLIENT CONTACT & PASSPORT INFO

CONTACT INFORMATION:

NAME (Please Print): _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

PHONE NUMBER: (_____) _____

EMERGENCY CONTACT INFORMATION:

NAME (Please Print): _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

PHONE NUMBER: (_____) _____

PASSPORT INFORMATION:

NAME (As on Passport): _____

NATIONALITY: _____

PASSPORT #: _____

EXPIRATION DATE: _____



PAYMENT SCHEDULE

(Group Leader – Please Provide Copy for Client)

DIVE TRIP: **MALDIVES** DATE: **10/18/16** THROUGH **10/31/16**

LEADERS: **Jeff Smith/Fred Colburn** TRAVEL AGENT: **World of Diving**

Please note: All Dive Trips promoted by Group Leaders or promoted within Pacific Wilderness, Inc. are scheduled, booked, financed and led by the aforementioned Group Leader. Pacific Wilderness, Inc. is in no way connected to any financial dealings concerning this Dive Trip. All Payments and deposits should be made directly to the Group Leader – ***Payable to Travel Agent Listed Above.***

DEPOSIT AND PAYMENT SCHEDULE:

All trips require a **non-refundable** trip deposit for each person booking. Payment Schedule and Deposit amount for this Dive Trip is listed below:

	<u>Upper Deck</u>	<u>Middle Deck</u>	<u>Lower Deck</u>	
• Deposit (Non-refundable)	\$1,699.00	\$1,499.00	\$1,299.00	Paid: ___/___/___
• Payment #2	\$1,000.00	\$1,000.00	\$1,000.00	Due: <u>02/15/16</u>
• Payment #3	\$1,000.00	\$1,000.00	\$1,000.00	Due: <u>05/01/16</u>
• Final Payment (90 days out)	<u>\$ 700.00</u>	<u>\$ 700.00</u>	<u>\$ 700.00</u>	Due: <u>07/15/16</u>
Trip Total:	\$4,399.00	\$4,199.00	\$3,999.00	

CREDIT CARD AUTHORIZATION:

CREDIT CARD TYPE: Visa Master Card Amex Discover Card

Credit Card # _____

Card Expiration Date _____/_____ for visa, mc & discover include 3 digit number on BACK of Card _____

Credit Card Holder's Name _____

Billing Address (no PO Boxes) _____

City _____ State _____ Zip _____ Phone _____

Signature of cardholder _____ Date _____/_____/_____

**By signing, I hereby agree to the terms & conditions and authorize payments described above.
Credit card statement will show transaction as: Agent Listed Above or the airline & Ticket #**



OPTIONAL TRAVEL INSURANCE



PLEASE READ THIS CAREFULLY

You are a valued client and we want to do everything possible to make your trip enjoyable and worry free. Because the unforeseen and unexpected can occur - we recommend Travel Guard Insurance, It offers excellent value. If you would like Travel Insurance please speak to your Group Leader and he will provide you with the necessary paperwork or you may go online to www.TravelGuard.com and book it on your own.

If you would like to compare Insurer's policies side by side, a great site is <http://insuremytrip.com> .

Please Check One:

I wish to purchase Travel Insurance through this Trip's Travel Agent and will do so directly. I understand I must do so within 14 days of my Initial Trip Deposit.

I have enrolled in Travel Insurance on my own. I understand I am responsible for confirming the Travel Insurance I have purchased is Valid and through a reputable company.

Do **NOT** enroll me for Travel Insurance. I understand that I am liable for any cancellation penalties and out-of-pocket expenses incurred. I will also make my own provisions in the event of an emergency while traveling.

(Please ask for a Copy of our Cancellation Policy if you opt to NOT Enroll in Travel Insurance)

NAME (Please Print) _____

SIGNATURE _____

DATE _____