

BLACKBEARD CHARTERS TRIP APPLICATION

3700 Hacienda Blvd Suite G, Davie, FL 33314
Toll Free: 800.327.9600 local: 954.734.7111 fax: 954.321.6582

FAX THIS FORM TO

sales@blackbeard-cruises.com • www.blackbeard-cruises.com

This form must be in our office prior to departure.

Trip Date: _____

First Name _____ Last Name _____ MI _____ Nickname or Preferred Name _____ Male Female

Address _____ D.O.B. (mm/dd/yyyy) * _____

City _____ ST _____ Zip _____ Country _____

(_____) _____ (_____) _____
Phone # Day Phone # Evenings E-mail address

Would you like to receive our quarterly newsletter advising you of specials and exciting news? YES NO

What travel documents are needed?

Effective January 1, 2007, all travelers to the Bahamas will need a passport. A passport is required for citizens of all other countries. Check with the Bahamas Embassy for visa requirements if citizenship is not US. http://www.un.int/bahamas/Visa_Requirements_List.htm

How do you plan to travel to the Bahamas? Plane Other _____

Arrival Carrier _____ Flight # _____ Arrival Date/Time _____

Departure Carrier _____ Flight # _____ Departure Date/Time _____

Special Requests _____

Is this your 1st Blackbeard's Cruise? Yes No

If not, when was your last Blackbeard's Cruise? _____ If not, how many previous Blackbeard's Cruises? _____

We highly recommend the purchase of travel insurance. This will protect you in case you have to cancel your trip due to unforeseen circumstances. You may obtain information about travel insurance from our office or our website. Have you or do you plan to purchase travel insurance? Yes No for options [click here](#)

Diving Information

Are you a certified diver? Yes No # of Dives? _____ Salt Water _____ Fresh Water _____

I rate my skill as a scuba diver: Beginner Intermediate Advanced

Certifying Agency _____ Level _____ Certification # _____

Rental Requests

We provide tanks, weights and weight belts. BC's, regulator sets, computers, wetsuits and dive lights are available for rent with prior payment. Rental Requests Regulator Dive Computer Dive Light

Wetsuit: Full Shorty Size _____ BC Size _____ If renting a BC or Wet Suit: height: _____ weight: _____

Medical Information

Contact in case of emergency _____ (_____) _____ (_____) _____
Day Phone # Evening Phone #

Required medication _____ Medication which may not be given _____

Medical Alert Information _____ Diver's Insurance Company & policy # _____

In case of a medical emergency, I authorize the crew of the vessel to administer first aid or get proper medical attention if necessary. I understand that the nearest recompression chamber is hours away and may require air evacuation. The time involved with boat and air transport poses additional risk to my personal safety. I accept this risk and am fully prepared to pay all expenses related to evacuation and treatment should it be deemed necessary by the vessel or myself.

Signature _____

Date _____

COMPLETE LIABILITY RELEASE

1. I UNDERSTAND THE PURPOSE OF SIGNING THIS DOCUMENT IS TO EXEMPT BLACKBEARD CHARTERS AND RELEASE ITS AGENTS AND ITS BOATS (WHETHER OWNED, LEASED OR CHARTERED) AND TO HOLD THESE ENTITIES HARMLESS FROM ANY AND ALL LIABILITIES ARISING AS A CONSEQUENCE OF THE FOLLOWING, OR ANY OTHER ACTS OR OMISSIONS ON THEIR PART, INCLUDING, BUT NOT LIMITED TO NEGLIGENCE.

2. I do not have in my possession any illegal drugs, nor am I taking, nor have I recently consumed any drugs or medications that would contraindicate diving and/or snorkeling.
3. I fully understand and am aware that the boat has limited medical facilities and that in the event of illness or injury, appropriate medical help must be summoned by radio and that treatment will be delayed until I can be transported to a proper medical care facility.
4. I understand that there are inherent risks associated with entering and exiting the water from a dive vessel. I specifically assume these risks. I understand that there are dangers associated with my use of the dive ladder and I specifically assume these risks.
5. I understand that a vessel is not a stationary surface and that it is subject to motion, tides, waves, sea conditions, wind and other forces. I expressly agree to use extra care when coming aboard or departing the vessel, whether to exit or enter the water or land, and, I specifically assume all risks in connection with entering, exiting and being aboard the vessel.
6. I will face all ladders or stairs aboard the vessel while ascending or descending them.
7. I will be present at and attentive to all briefings given by the divemaster and boat captain and if there is anything that I do not understand or have been taught differently, I will notify the boat captain immediately.
8. I certify, if I engage in scuba diving activities, that I am a certified diver or a student diver under the supervision of a scuba instructor and have been taught and understand scuba diving has inherent risks and dangers associated therewith including, but not limited to, risks associated with equipment failure, perils of the sea, acts of fellow divers and I **SPECIFICALLY ASSUME SUCH RISKS.**
9. If I have not been diving with the past year or I am not under the direct supervision of an instructor, I will request a refresher course from the dive master.
10. I acknowledge that I am physically fit to scuba dive and snorkel and I will not hold any of the above named persons or entities responsible if I am injured as a result of heart problems, lung problems, or other illnesses or medical problems which occur while diving and/or snorkeling.
11. Prior to each dive, I will inspect all equipment to be used. I will not hold Blackbeard Charters or any of its employees, agents, or boats responsible for my failure to inspect my equipment prior to diving.
12. I understand I have a duty to plan and carry out my own dive and to be responsible for my own safety and the safety of my buddy. I **WILL REMAIN WITH MY BUDDY AT ALL TIMES.**
13. I will start my ascent at the end of each dive with enough air to ensure being on the boat with a minimum of 500 PSI remaining in my tank.
14. I will immediately stop my dive if:
 - A) I feel uncomfortable with my diving abilities; and/or
 - B) Diving conditions are worse than those for which I have been trained or for which I have experience.
15. I am aware of the dangers of holding my breath while diving and of the dangers associated with rapid ascents and will not hold the above named persons or entities responsible for such acts.
16. While skin diving I will not remove my buoyancy control device (B.C.) at any time while in the water. I **ACKNOWLEDGE THAT DOING SO WILL CONSTITUTE A VIOLATION OF SAFETY RULES AND PROCEDURES FOR WHICH I EXPRESSLY ASSUME THE RISK.**
17. If I become distressed on the surface, I will **IMMEDIATELY** drop my weight belt and inflate my B.C. for permanent floatation assistance and if I want or need assistance from the boat, I will give the proper "diver in trouble" signal.
18. **IT IS MY INTENTION BY THIS INSTRUMENT TO GIVE UP MY RIGHT TO SUE ALL PERSONS OR ENTITIES REFERRED TO HEREIN, WHETHER SPECIFICALLY NAMED OR NOT, AND IT IS ALSO MY INTENTION TO EXEMPT AND RELIEVE BLACKBEARD CHARTERS, ITS EMPLOYEES, ITS AGENTS, AND ITS BOATS (WHETHER OWNED, LEASED OR CHARTERED) AND TO HOLD THESE ENTITIES HARMLESS FROM ANY LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE AND I ASSUME ALL RISK IN CONNECTION WITH SNORKELING, SCUBA DIVING AND BOATING ACTIVITIES AND ANY ACTIVITIES DIRECTLY OR INDIRECTLY RELATED THERETO. THIS RELEASE IS INTENDED TO FULLY RELEASE THE RELEASED INDIVIDUALS FOR ANYTHING WHICH MAY TRANSPIRE AT ANY TIME DURING MY TRIP, FROM INCEPTION OF THE TRIP UNTIL IT IS OVER AND I HAVE DISEMBARKED FOR THE LAST TIME.**
19. I HAVE READ AND UNDERSTAND THE FOREGOING IN ITS ENTIRETY AND AGREE TO THE TERMS AND CONDITIONS HEREIN ABOVE SET FORTH ON BEHALF OF MYSELF, MY HEIRS AND MY PERSONAL REPRESENTATIVES.

FULL NAME _____

SIGNATURE _____

SIGNATURE OF PARENT OR LEGAL GUARDIAN (If under 18) _____

- CHILDREN UNDER THE AGE OF 15 MUST BE SUPERVISED AT ALL TIME BY A PARENT OR GUARDIAN. CREW CANNOT PROVIDE SUPERVISION OR CHILD CARE DURING THE CRUISE.

DATE _____