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BOOKING CONTRACT

This is to formalize and confirm my intention to book a reservation for the _____ dive
cruise scheduled on _____.

I shall also remit the corresponding payment for the said tour.

(Please type or print the information below and return to us via facsimile transmission)

NAME: _____ AGE: _____ SEX: _____

BIRTHDATE(mm/dd/yy): ____ / ____ / ____ HOMEPHONE: _____ FAX: _____

ADDRESS: _____

OCCUPATION: _____ BUSINESS PHONE: _____ FAX: _____

E-MAIL ADDRESS: _____ COMPANY NAME: _____

BUSINESS ADDRESS: _____

CERTIFICATION LEVEL: _____ CERTIFYING AGENCY: _____

NUMBER OF DIVES TO DATE: _____ WEIGHT BELT REQUIREMENTS: _____ lbs/kg _____

DIETARY REQUIREMENTS: _____

OTHER REQUIREMENTS: _____

DIVER INSURANCE COMPANY: _____

IN CASE OF EMERGENCY PLEASE NOTIFY: _____

PHONE: _____ FAX: _____

SIGNATURE: _____ DATE: ____ / ____ / ____

PAYMENT POLICY:

For FIT's: 30% deposit within 10 days of reservation. 40% additional required 60 days prior to departure. Full balance required 30 days prior to departure.

For Group: \$1000 non-refundable deposit within 10 days of reservation. 50% additional payment within 90 days prior to departure. Full balance required to 60 days prior to departure.

CANCELLATION POLICY:

For FIT's: 91 days prior to departure, 20% is forfeited. 61-90 days prior to departure 33% is forfeited. 60 days prior to departure, no refund is available.

For Group: 120 days prior to departure, no refund is available.