



Guestformular

Cruise departure date

Personal Informationen		
First name	Family Name	
Gender	Date of Birth	
E-Mail	Phone / WA number	
Adress (street, zip code, city and country)		
Dacchart		
Passport		
Pass Number	Issued Date	
Issued Country	Valid until	
Arrival		
	A	
Arrival Date	Arrival Time	
Airport	Flight number	
Requested Transfer / Pickup		
5		
Departure		
Departure Date	Departure Time	
Airport	Flight Number	
Requested Transfer / Drop		
Divine		
Diving		
Certification	logged dive	es
Last Dive	Certification Organization (PAD	01)
Insurance	Insurance Number	er
Requested rental gear with sizes		
Dive Experience		
Nitrox Certified?	Liveaboard Experience	2?
Current Dive Experience?	Night Dive Experience	?
Underwater Fotografer?	Other infos needed for us	5?





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Do you suffer from or ever suffered from a medical condition affecting your ability to dive? if yes, please descibe:					
Emergency Adress					
First Name			L	ast Name	
Email			Phone numb	per or WA	
Andress			Other inf	fo needed	
Others					
Allergies					
Special food restrictions					
Other information for us					
I, the undersign, hereby certify that I have understood the above questions and that my answer are a true and accurate record.					
Signature				Date	e



Signature of Diver



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Acknowledgement	of advice and	confirmation of	accumption of	frick
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In pa	articular, I acknowledge that:
 3. 4. 5. 6. 7. 8. 	Dive From KLM SUNSHINE only with EAN32 and the depth is strictly limited to 30m Diving with compressed air / nitrox involves certain inherent risks of decompression sickness, embolism and disablement. Injuries of the type referred to in above may require treatment in a recompression chamber. Open water trips may be conducted at a site that is remote either by time and/or distance from recompression chamber. Skin diving and scuba diving are physically demanding activities and in susceptible individuals may cause heart attack, panic or hyperventilation. Scuba diving involves the use of equipment that may malfunction giving rise to risk of deaths or disablement. Skin diving and scuba diving necessarily involve exposure to the natural elements including but without limiting the generality here of storm, tempest, tides and marine life. Such exposure brings with attendant risk of death or disablement. BlueBayDivers can not be held responsible for deep dives deeper than 30 meter. I will dive within my current certification; any dive over my training limit will therefore be at my own risk.
10. 11. 12.	I will follow the instructions given by the dive instructor/ dive master/ dive guide and the boat captain before, during and after each dive. I have in mind, that the Cruise with KLM SUNSHINE will be in remote areas where no direct medical care or hospital facilities will be available. Eknowledge that prior to commencing my dives with BlueBayDivers I completed attached Diver's History ement, detailing my medical fitness.
und emp	ther acknowledge that having been advised of the risk associated with skin diving and scuba diving. I wish to ertake dive activities with BlueBayDivers and hereby release and hold harmless BlueBayDivers , its agents and bloyees, from any suit, demand or claim arising as a consequence of death of injury received by me during my icipation in the said activity for the entire period of my cruise.
	ther acknowledge that this document may be relied upon in any proceedings instituted in any court by me or my s, executors and assigns.
Date	e

Signature of Parents/ Guardian

(if under 18 years of age)