

FWSA 2020 COZUMEL Registration Form

October 3 - October 10, 2020

(If using own air, you must arrive in Cozumel on dates stated)

Please print clearly: The information you provide is for the exclusive use of FWSA and will not be sold for solicitation.

Print LEGAL NAME as it appears on Passport: Exact FIRST Exact MIDDLE Exact LAST

** It is MANDATORY to SEND a BLACK/WHITE COPY OF YOUR VALID PASSPORT - Valid thru April 10, 2021**

Mailing Address: Nickname:

City: State: Zip Code:

PHONE: Home: Cell: Work:

Date of Birth: Mo Day Year Passport Number Expiration

Print E-Mail Address:

Male Female I am a Scuba Diver / Non-Diver

Divers Alert Network (DAN) Insurance #: Expiration Date:

I am a MEMBER of Ski Club OR a FWSA DIRECT MEMBER

FWSA Council (circle): Arizona, Bay Area, Central, Intermountain, Los Angeles, Orange, NBSWR, Northwest, San Diego, Sierra

EMERGENCY INFORMATION

Emergency Contact - Immediate Family member NOT ON THIS TRIP (required for all participants):

Name: Relationship:

Contact Number: Cell Number:

List Food Allergies and/or drug allergies (optional):

Medical Conditions (optional):

List Over the Counter/prescription drugs taken regularly (optional):

List any Special Dietary Needs:

I have been advised that the FWSA trip package does not include travel insurance and I understand that I do have the option to purchase my own Travel Insurance. FWSA DOES HIGHLY RECOMMEND TRAVEL INSURANCE.

(Travel Ins. details offered by our tour operator will be provided or you may purchase from your own provider)

- I understand that I am financially responsible for myself whether or not I purchase Travel Insurance.
I understand it is my responsibility to obtain all legal documents required for travel including passports & visas.
I understand that my passport must be valid at least 6 months after return of trip (April 10, 2021)
I have been advised of the CANCELLATION Policy - the deposit is completely refundable until May 31, 2020. See complete CANCELLATION Policy and associated fees listed on the documents. NO REFUNDS after June 30, 2020 unless a compatible replacement is found. There may also be a transfer fee and associated vendor/supplier fees.
NO REFUNDS for Any NO-SHOWS
I have received and read a copy of the FWSA Conduct Policy and agree to comply.
I understand that I must be a current member of a FWSA Club or a FWSA Direct member. I further certify that I'm a current FWSA Club or a FWSA Direct member and that the information I have provided on this form is accurate.
I understand that the culture of the place(s) I am visiting might not be what I am normally accustomed to in the United States.
I am aware that FWSA may use images taken during this trip for marketing and promotional purposes. I authorize and hold harmless FWSA and its agents for the use of my image. I may choose to sign an exemption form to exclude the use of my pictures being used for this purpose.

Participant Signature OR Parent/Legal Guardian for Minor

Date

CST #2036983-40

TRANSPORTATION OPTIONS – MARK AN “X”

Our goal is to travel effortlessly, seamlessly and use direct flight options when available. Please read all the options carefully before deciding on your transportation choice.

☐ **Option #1: FWSA Assisted Air departing from:** _____ **Contact Randy Lew**
Air pricing subject to change until tickets are actually issued. Must be paid in full to Roatan Charter

☐ **Option #2 – OWN Air Transportation & FWSA Transfers to/from resort and airport.**
You must arrive in Cozumel early afternoon on October 3, 2020 & provide a copy of your “Own Transportation” itinerary and notify trip leader of any/all changes that occur.

AND...If your flight is cancelled, delayed or you miss your “OWN AIR” flight, it is Your Responsibility and Cost in arranging your own ground transfer to your hotel.

[Please inform Randy Lew if such situations occur – call or text 530-304-0802]

Travel & Divers Alert Network Insurance

FWSA highly recommends that you purchase travel insurance. Roatan Charters offers trip insurance on their website at <https://roatancharter.com/pages/tripinsurance> . Additional travel insurance vendors can be found on FWSA website at <http://www.fwsa.org/Travel/insurance.html> . In addition, all scuba divers will be required to have diving accident insurance through Divers Alert Network (DAN), the premier dive insurance. You can get their insurance info at <http://www.diversalertnetwork.org/>

FULL TRIP – 7 Nights
DIVE TRIP & LODGING OPTIONS – MARK AN “X”

We are offering **Iberostar Resort**, October 3 -October 10 (7 nights) for the 2020 Cozumel Dive Trip.

1st, Choose your trip Land Package - Please select one of the following:

- Option DP1:** **Dive Package – Iberostar Resort (8 days; 10 boat dives)** **\$1,378 pp (dbl occ)**
- Option NDP1:** **Non-Dive Package** **\$ 899 pp (dbl occ)**

2nd, Choose your Lodging / Upgrade Options – MARK AN “X”

- Option A1:** **Superior Room** **\$ 114 pp**
- Option A2:** **Ocean View Room** **\$ 282 pp**
- Option A3:** **Ocean Front Room** **\$ 340 pp**
- Option S1:** **Single Room Supplement** **\$ 297**

Iberostar Resort Includes:

- 7 nights Deluxe Room (double occupancy)
- 3 meals daily (buffet & Specialty Restaurants)
- Unlimited alcohol (local beer, house liquor & cocktails)
- Comp Wifi (public areas only)
- Luggage assistance
- Ground transfers from Cozumel Airport
- Resort fees, taxes and basic gratuities (dive gratuities not included)

In Addition, the Dive Package includes:

- 5 days of 2 tank boat dives, including 2 Cenotes dives with Dressel Divers
- Complimentary Nitrox

The bungalow styled rooms will feel like a secret hideaway in the middle of paradise. Each room will assure All-inclusive access, comfort, plus a private patio and hammocks to enjoy the Caribbean outdoors! These rooms have views of the jungle surrounding the hotel.

LODGING/ROOMMATE

<input type="checkbox"/> I HAVE A ROOMMATE	YOUR NAME: _____ ROOMMATE: _____ _____
<input type="checkbox"/> I DO NOT HAVE A ROOMMATE:	<input type="checkbox"/> I Need a Female Roommate <input type="checkbox"/> I Need a Male Roommate Are you a Smoker? ____ Yes ____ No Do you Snore excessively ? ____ Yes ____ No Describe your personality _____ [Ex. Outgoing, quiet, adventuresome, reserved, diver, non-diver...]
<input type="checkbox"/> [for office use only]	Assigned roommate: _____

Room Types Available:

The **Standard** room has a private balcony with views of the jungle surrounding the hotel. You can relax on your sun lounger while you think about the next water sport you want to try out.

The **Superior Standard** room is located close to the hotel's pool and beach, so you can be the first to dive into the waters of the Caribbean. You can relax on a sun lounger on your private balcony

From the **Ocean View Standard**, you can gaze at the Caribbean and the white sandy beach from your balcony.

In the **Ocean Front Standard room**, you can take a dip in the waters of the Caribbean just a few yards from your room by just opening the door that separates your private terrace from the beach.

PAYMENT METHOD Information

X	<p>** PLEASE mail your completed registration forms & waiver, along with a check for your trip deposit. Subsequent payments may be made online by credit card or by mailing a personal check, cashier check, or money order. Your registration will not be complete, and your spot will not be reserved, until you have submitted your documents (including black/white copy of valid passport) and have paid your initial deposit.</p> <p>**if you choose to pay by credit card, instructions to the online payment system will be provided on your accounting statement, for subsequent payments once we have received your registration.</p>
<input type="checkbox"/> <input type="checkbox"/>	<p>Please mark one of the following for making future payments:</p> <p>I will continue to make payments by check, cashier check or money order.</p> <p>I will continue to make payments by PayPal and/or Credit Card via online payment method. Do send me the information in order to pay online.</p>

*Send ALL the Registration Forms, Trip & Transportation Options, Waiver, Lodging & Payment Method Form and a legible **BLACK & WHITE** photocopy of your Valid passport (good through April 10, 2021), and Check Payment to:*

Randy Lew
829 SE 11th Place
Battle Ground, WA 98604

Cell: (530) 304-0802
E-mail: Fwsa13randy@telis.org

Make check payable to **FWSA**. *Please note "FWSA 2020 Cozumel Trip on each check".*

There will be a charge of \$25.00 for return checks from your bank.

Deposit Payment Amount: \$ _____ **Check #** _____ **Other:** _____

***FWSA Assisted Air Transportation & Lodging Packages
Payment and Cancellation Schedules***

Iberostar Resort

Option DP1 - Dive Package

Option DP1: Standard Dive Package - Payment Schedule & Cancellation Policy

<u>Payments</u>	<u>DUE DATE</u>	FWSA Assisted Air Payment	Land Pkg. Payment	Total Payment DUE	*Cancel. Fees	Cancel. Date
<i>Initial Deposit</i>	<i>Due Now!</i>	^	\$500.00	\$500.00	<i>No Penalty up to</i>	June 18, 2020
2 nd Payment	June 1, 2020		\$500.00	\$500.00	\$100.00	Between June 19, 2020 – July 3, 2020
3 rd Payment				0	\$689.00	Between July 4, 2020 – August 2, 2020
FINAL PAYMENT * A \$100.00 late fee may be applied if payment not made by due date.	August 1, 2020		BALANCE of Land Pkg.	Balance Due	Full Penalty – NO Refund*	After August 3, 2020

^ Assisted Air – Non-refundable, Cancellation fees 100% after purchase

**Cancellation Policy is based on the Standard Dive package and fees for the upgrades will vary according to package price.*

Such penalty fees are subject to additional vendor or supplier charges.

(Substitutions may be made with associated change fees applied – details will be on a case by case basis)

***FWSA Assisted Air Transportation & Lodging Packages
Payment and Cancellation Schedules***

Iberostar Resort

Option NDP1– Non-Dive Package

Option NDP1: Standard Non-Dive Package - Payment Schedule & Cancellation Policy

<u>Payments</u>	<u>DUE DATE</u>	<u>FWSA Assisted Air Payment</u>	<u>Land Pkg. Payment</u>	<u>Total Payment DUE</u>	<u>*Cancel. Fees</u>	<u>Cancel. Date</u>
<i>Initial Deposit</i>	<i>Due Now!</i>	^	\$500.00	\$500.00	<i>No Penalty up to</i>	June 18, 2020
2 nd Payment	June 1, 2020		\$200.00	\$200.00	\$100.00	Between June 19 2020 – July 3, 2020
3 rd Payment				0	\$450.00	Between July 4, 2020 – August 2, 2020
FINAL PAYMENT <i>*A \$100.00 late fee may be applied if payment not made by due date.</i>	August 1, 2020		BALANCE of Land Pkg.	Balance Due	Full Penalty – NO Refund*	After August 3, 2020

^ Assisted Air – Non-refundable, Cancellation fees 100% after purchase

**Cancellation Policy is based on the Standard Dive package and fees for the upgrades will vary according to package price. Such penalty fees are subject to additional vendor or supplier charges.*

(Substitutions may be made with associated change fees applied – details will be on a case by case basis)

FWSA TRIP CONDUCT POLICY

This policy applies to all persons participating on a Far West Ski Association ski week or trip. It is intended to maximize the enjoyment for all trip participants and provide guidelines for the FWSA Travel Staff, Council Trip Leaders, and assigned Trip Assistants. All trip participants are requested to observe common courtesy and generally accepted standards of social and moral behavior.

In accordance with Federal and State laws, the Far West Ski Association will enforce a "Zero Tolerance Policy" on illegal drug use at any FWSA sponsored event or trip. Failure to observe this policy will automatically remove you from participation in future FWSA events.

Participants shall adhere to the requirements of FWSA trip packages (e.g., lift tickets) and participants agree not to transfer, resell, or barter all or portions of that package. Only FWSA, or the issuing agency may compensate the participant for the unused portion or permit transfer. Failure to comply may result in exclusion from future FWSA events.

Alcohol and tobacco use is allowed in moderation and where permitted by law. FWSA Travel Staff, Council Trip Leaders, or assigned Trip Assistants, will ask a participant to cease any loud, obnoxious, or offensive behavior. Participants who refuse to cooperate will be reported to local security or local police.

Far West Ski Association maintains a strict policy prohibiting sexual harassment and harassment because of race, religion, color, national origin, ancestry, disability, medical condition, marital status, sexual orientation, age, or any other basis made unlawful by any applicable law or ordinance or regulation. Prohibited harassment in any form, including verbal, physical and visual conduct, threats, demands, and retaliation is unlawful and will not be tolerated. If, after a request to refrain from this behavior, the participant continues, FWSA Travel Staff, Council Trip Leaders, and assigned Trip Assistants may contact local security or local police. Profanity and off-color humor is only permitted if it is not offensive to other participants. Please stop the offensive behavior if asked by another participant, FWSA Travel Staff, Council Trip Leader, or assigned Trip Assistant.

Parents/Legal Guardians of minor children under the age of 18 are responsible for the supervision and behavior of their children. Children under 12 years will be under the direct supervision of their parents/legal guardians at all FWSA events. Parents/Legal Guardians are responsible for providing supervision of their children under 12 years of age during the time that they are attending a FWSA function without their children (e.g., children under 12 will not be left alone in the lodging rooms).

FWSA Travel Staff, Trip Leaders, assigned Trip Assistants, and/or FWSA Board of Directors will attempt to resolve problems in a mutually beneficial manner. When resolution cannot be achieved, FWSA Travel Staff, Trip Leaders, and assigned Trip Assistants have the authority to call on-site security or local police to resolve the problem. Participants may be excluded from a trip at their own expense and without reimbursement of trip expenses.

FWSA 2020 COZUMEL SCUBA DIVE TRIP

October 3 – 10, 2020

SPORT PARTICIPANT RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISK AND INDEMNITY AGREEMENT.

Please read and be certain you understand the implications of signing.

Express Assumption of Risk Associated with Sport, Venue Use and Related Activities.

I, _____ do hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with all activities of FWSA Cozumel Scuba Dive Trip including but not limited to scuba diving, snorkeling, certain additional risks, dangers and hazards including, but not limited to transportation of equipment related to the activities, and traveling to and from activity sites in which I am about to engage. **Inherent hazards and risks include but are not limited to:**

1. Risk of injury from the activity and equipment utilized is significant including the potential for broken bones, severe injuries to the head, neck, and back or other bodily injuries that my result in permanent disability and death.
2. Possible equipment failure and/or malfunction or misuse of my own or others' equipment.
3. **I AGREE THAT I WILL WEAR APPROVED PROTECTIVE GEAR AS DECREED BY THE GOVERNING BODY OF THE SPORT I AM PARTICIPATING IN.** However, protective gear cannot guarantee the participant's safety.
4. Variation and/or depth of the dive locations, underwater hazards including but not limited to ship wrecks, hazardous sea life, caves or tunnels, variation or changes in surfaces including but not limited to water, docks, dive boats, other persons, and other natural and man-made hazards.
5. My own negligence and/or the negligence of others, including but not limited to operator error and guide decision making including misjudging depth, terrain, weather, or other obstacles.
6. Exposure to the elements and temperature extremes may result in heat exhaustion, heat stroke, sunburn, hypothermia and dehydration.
7. Dangers associated with exposure to natural elements include but are not limited to rock fall, inclement weather, thunder and lightning, severe and or varied wind, temperature and other weather conditions.
8. Accidents or illness occurring in remote places where there are no available medical facilities.
9. Fatigue, exhaustion, chill, and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.
10. Impact or collision with other athletes, spectators, facility employees, pedestrians, motor vehicles, boats, and cyclists.

***I understand the description of these risks is not complete and unknown or unanticipated risks may result in injury, illness, or death.**

Release of Liability, Waiver of Claims and Indemnity Agreement

In consideration for being permitted to participate in the above described activity (ies) and related activities, I hereby agree, acknowledge and appreciate that:

1. **I HEREBY RELEASE AND HOLD HARMLESS WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE,** the following named persons or entities, herein referred to as releasees: **Far West Ski Association (FWSA) and their directors and officers, FWSA Ski Councils and their directors and officers, FWSA Ski Clubs and their directors and officers, and their successors and assigns.**
2. To release the releasees, their officers, directors, employees, representatives, agents, and volunteers from liability and responsibility whatsoever and for any claims or causes of action that I, my estate, heirs, survivors, executors, or assigns may have for personal injury, property damage, or wrongful death arising from the above activities whether caused by active or passive negligence of the releasees or otherwise. By executing this document, I agree to hold the releasees harmless and indemnify them in conjunction with any injury, disability, death, or loss or damage to person or property that may occur as a result of my engaging in the above activities.
3. By entering into this Agreement, I am not relying on any oral or written representation or statements made by the releasees, other than what is set forth in this Agreement. FWSA is not responsible for trip information typographical errors.
4. This agreement shall apply to any and all injury, disability, death, or loss or damage to person or property occurring at any time after the execution of this agreement.

This release shall be binding to the fullest extent permitted by law. If any provision of this release is found to be unenforceable, the remaining terms shall be enforceable.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND THAT I HAVE GIVEN UP LEGAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

S/ _____

Signature of Adult Participant	Name of Adult Participant (Please Print)	Date
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FOR PARTICIPANTS OF MINORITY AGE: *This is to certify that I, as Parent, Guardian, Temporary Guardian with legal responsibility for this participant, do consent and agree not only to his/her release of all Releasees, but also to release and indemnify the Releasees from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns, and next of kin.*

S/ _____

Signature of Parent or Adult Legal Guardian if Participant is a Minor	Name of Parent or Adult Legal Guardian (Print Clearly)	Date
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