

Dolphin Encounters Camp Registration & Waiver Form

Please read the following policies & turn in the completed form at the time of your program check-in.

Reservations, Check-In & Transportation:

- Reservations for camp programs are valid only for the exact number of campers for which spaces have been reserved AND paid. Changes or cancellations for a camp program must be done within (7) days of the scheduled camp in order to qualify for a refund.
- The **Camp Registration & Waiver Form** must be completed by a legal adult and turned in at the time of payment.
- Additional cost for the optional weekly field trip may be paid on the date of the activity.
- This program is NOT open to observers. Parents or other traveling companions wishing to be on Blue Lagoon Island for the day may purchase an observer ticket (\$25) but will NOT be allowed to attend the sessions or seminars with campers.
- After check-in, complimentary boat transportation is provided to and from Blue Lagoon Island. Check your camp information for the details of the departure and return times to the Paradise Island Ferry Terminal.
- There will be a \$20 penalty fee for late pick-up in the evening after 5:30PM. Payment will be due the following morning for the camper to attend.

Payment:

- **Reservations REQUIRE 100% PAYMENT within 7 days of making the reservation.** Payment can be made in cash, credit card or traveler's cheques at the check-in window for Dolphin Encounters at the Paradise Island Ferry Terminal (8AM to 5PM).
- **Failure to make payment by the deadline will result in the cancellation of the reservation without notice.**
- No refunds will be issued for any pre-paid program unless (A) the cancellation is made at least seven (7) days prior to the reservation date, (B) a doctor's note is provided for the absent guest, OR (C) the program was cancelled by Dolphin Encounters.

Medical, First Aid & Emergency Information:

- Guests with known medical conditions OR medication requirements are responsible for notifying the education staff upon arrival on the island. The education staff must be notified of any campers that are minors that require prescription medication during the camp program.
- Our education staff are certified in Emergency First Aid Response & CPR. In the event of an emergency, the education staff will notify the emergency contact for the camper, the management of DEL as well as make arrangements for transport to the appropriate medical facilities.

Consent & Liability Form:

For and in consideration of permitting _____ to enroll in and participate camper activities and activities incidental thereto, including without limitation, activities involving close proximity to and contact with animals, as a camper on, from, or in the location Dolphin Encounters Ltd. chooses to offer the program, beginning on the _____ day of _____, 2010, the undersigned, for himself or herself and for his or her heirs, executors, administrators and assigns, voluntarily agrees that under no circumstances will the undersigned, or the heirs, executors, administrators or assigns of the undersigned prosecute or present any such claim or cause of action for personal injury, property damage or wrongful death against Dolphin Encounters Ltd. or any of their respective officers, agents, servants or employees, whether such claim or cause of action arises from the negligence of the Dolphin Encounters Ltd. or any of the respective officers agents, servants or employees, or otherwise.

It is the intention of the undersigned by this instrument, to exempt and relieve Dolphin Encounters Ltd. and their Officers, Agents, Servants or Employees from liability for personal injury, property damage or wrongful death caused by negligence.

The undersigned further authorizes Dolphin Encounters Ltd. to take any steps necessary to insure the health of _____ in case of an emergency. The undersigned acknowledges that he or she has read this instrument, has been fully and completely advised of the potential hazards incidental to engaging in the activities described, and is fully aware of the legal consequences of signing this instrument.

Dates of Program: _____ Program Name: _____ Confirmation Number: _____

Campers Age: _____ Hotel (if applies): _____ Room Number: _____

Camper's Name (Print): _____ Camper's Signature: _____

Parent/Guardian's Name (Print): _____ Parent/Guardian Signature: _____

Home Phone: _____ Cell phone: _____ Emergency Phone: _____

Emergency Contact (Print): _____ Do you have any allergies? _____

Do you have a medical condition or medication which we need to be aware of? _____

Do you have special requirements or needs (wheelchair access, etc.)? _____

Who is authorized to pick up the camper at the ferry terminal after the camp? _____

Preferred T-shirt Size: _____ Is English the camper's first language? _____

How did you hear about the program? _____ Email: _____

Phone 242-363-1003

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