

THELONGHOSE CLIENT REGISTRATION FORM

Personal Details	
First Name	Date of Birth (DD/MM/YY)
Last Name	Nationality Passport n°
Email	I don't want to subscribe to THELONGHOSE newsletter <input type="checkbox"/>

Home Address		
Street, n ^a	City	Postal Code
Country	Mobile n°	

Local Address		
Hotel/Appart. Name	Room n°	Pick-up <input type="checkbox"/>
City	Date of Departure (DD/MM)	
Emergency Contact	Emerg. phone n ^a	

Diving details		
Cert. Level	N° of logged dives	Date of Last Dive (MM/YY)
Dive insurance <input type="checkbox"/>	Company	Policy n°
Dive Medical <input type="checkbox"/>	Deepest dive (m)	

Equipment you have with you				
Mask <input type="checkbox"/>	Fins <input type="checkbox"/>	Boots <input type="checkbox"/>	BCD <input type="checkbox"/>	Wing <input type="checkbox"/>
Bungeed short hose <input type="checkbox"/>	Long hose w/clip <input type="checkbox"/>		Backplate w/ harness <input type="checkbox"/>	
Reg. (single) <input type="checkbox"/>	Reg. (double) <input type="checkbox"/>	Computer / Depth Gauge <input type="checkbox"/>	SMB <input type="checkbox"/>	
Wetsuit ____mm <input type="checkbox"/>	Drysuit <input type="checkbox"/>	Wetnotes <input type="checkbox"/>	Stage regulator <input type="checkbox"/>	
Primary light <input type="checkbox"/>	w/ handle <input type="checkbox"/>	w/ canister <input type="checkbox"/>	Back-up light <input type="checkbox"/>	
Pockets (e.g. shorts) <input type="checkbox"/>	Other			

Conditions and warranties
<p>In none of the courses taught by THELONGHOSE, paying for the course means buying the certification. We try to create highly skilled thinking divers, therefore the certification needs to be earned. All courses include a second reevaluation within one year.</p> <p>50% deposit requested upon booking. Full payment requested on the first day of the course/diving package.</p>

I (name) _____, hereby affirm that I am aware that scuba diving have inherent risk which may result in serious injury or death. The information provided in this form is accurate to the best of my knowledge.

I understand and agree that neither THELONGHOSE, nor its dive professionals, nor the facility where my dives/training take(s) place accept any responsibility for any death, injury or other loss suffered or caused by me or resulting from my own conduct or any matter or condition under my control that amounts to my own contributory negligence.

By filling this form, I accept THELONGHOSE Terms & Conditions (can be found at <http://www.thelonghose.com/assets/terms-conditions-2014.pdf>).

I agree that THELONGHOSE and its representatives may contact me in the future, through email, phone calls or newsletters to inform me about offers and upcoming courses and events.

I also accept to have pictures and videos taken by THELONGHOSE during the course which may be used by THELONGHOSE for promotional purposes both online and offline.

Full name _____ Date _____ Signature _____

-----TO BE FILLED BY INSTRUCTOR-----

Service Details				
Course _____ <input type="checkbox"/>	Dives _____ <input type="checkbox"/>	Start date _____	Finish Date _____	
TOTAL Price _____€ <input type="checkbox"/>	Deposit _____€ <input type="checkbox"/>			
Comments:				

Equipment Rental (to be given back at the end)					
Mask <input type="checkbox"/>	Fins <input type="checkbox"/>	Boots <input type="checkbox"/>	BCD <input type="checkbox"/>	Wing <input type="checkbox"/>	
Bungeed short hose <input type="checkbox"/>	Long hose w/clip <input type="checkbox"/>		Backplate <input type="checkbox"/>	Harness <input type="checkbox"/>	
Reg. (single) <input type="checkbox"/>	Reg. (double) <input type="checkbox"/>	Computer / Depth Gauge <input type="checkbox"/>		SMB <input type="checkbox"/>	
Wetsuit _____mm <input type="checkbox"/>	Drysuit <input type="checkbox"/>	Wetnotes <input type="checkbox"/>	Stage regulator <input type="checkbox"/>		
Primary light <input type="checkbox"/>	w/ handle <input type="checkbox"/>	w/ canister <input type="checkbox"/>	Back-up light <input type="checkbox"/>		
Pockets (e.g. shorts) <input type="checkbox"/>	Others: _____				
D-ring (#:) <input type="checkbox"/>					

Service Log					
Date	Item	Price	Paid Amount / Type		Due

Comments