



Wild Dolphin Project Field Participant Application

WDP, PO Box 8436, Jupiter, FL 33468 (561) 575-5660 fax: (561) 575-5681

For participation on trip/trips during the year 2012

Name: (First)	(MI)	(Last)
Address 1:		Address 2:
City:		State:
Country:		Zip code:
Home phone #:		Work/Mobile #:
Email:		Date of Birth:
Passport #:		Citizenship:
Passport Expiration Date:		Date/Place Issued:

In case of emergency notify:

Name:		Home Phone #:		
Address:		Work Phone #:		
City:		State:		
Country:		Zipcode:		
Statement of general health (please check one):	Poor:	Average:	Good:	Excellent:
Health Insurance (Company/Policy #):				
DAN Membership (if applicable):				
Does your health insurance cover you out of country?				
Personal Medications?			Food allergies?	
Strict Food <i>Requirements/Restrictions?</i>				
Height:	Weight:	Sex:	Smoker:	Good Snorkeler? (must have own equipment)
Are you a previous WDP participant?				

**Please circle appropriate skills you possess:*

Photography Boat Maintenance Data collection Cooking Computer (PC/Mac) Video

Reservations/Cancellations: Your balance is due 90 days before departure. Deposit of \$750.00 must be made to reserve your spot. Whenever possible, we try to fill your spot if you decide to cancel. If we are unable to do so, the following cancellation policy holds:

Cancellations made by you in writing will entitle you to a refund, less a cancellation fee.

(Based on date your written cancellation is received by our office.)

More than 5 months prior to departure:	\$50
90 - 149 days prior to departure:	\$150
60 - 90 days prior to departure:	\$500
45 - 60 days prior to departure:	75% of trip price
Less than 45 days prior to departure	100% of trip price

We have the right to cancel if full payment is not received 90 days prior to departure.

Included/Not Included: Fee includes accommodations, meals and beverages on board *Stenella*. Fee does not include air or other travel to trip departure point; hotels; taxis; snorkeling equipment; personal items; passport fees; airport taxes; insurance; laundry; entertainment or meals while on shore; medical or hospitalization costs; departure tax from the Bahamas; or additional expenses arising from delay or extension of expedition due to weather, sickness, transportation failure, or other causes beyond our control.

Travel Insurance

The Wild Dolphin Project recommends that you purchase **short-term travel insurance** and **trip cancellation coverage** through your insurance agent or travel agent to protect yourself and your equipment if your health, or weather or boat circumstances make it necessary to cancel or interrupt your trip. This insurance will reimburse you for non-refundable air, and WDP trip costs in case of cancellation. Unfortunately, due to weather, mechanical failure, health issues, etc., some last-minute itinerary changes or cancellations are unavoidable. Please carefully read our cancellation policy and your travel insurance policy to make sure you are covered.

Health Insurance

Please confirm that your health insurance will cover you in the Bahamas. WDP also recommends that you purchase *diving insurance* in order to be covered for any accidents that may occur while you are in the water, including emergency evacuation via helicopter. If you are interested in purchasing diving insurance (applicable to snorkeling as well as scuba diving), you can learn more about Divers Alert Network (DAN) Insurance at www.diversalertnetwork.org or by calling 1-800-446-2671. They offer various plans starting at \$35 a year, which include reimbursement for medical bills due to diving injuries at any depth, lost equipment, trip cancellations, etc.

Under-subscription on a particular trip may require that we cancel the trip you have booked and transfer your reservation to another. If you prefer, we will of course refund in full the deposit and payments you have made. In no event, however, shall our liability exceed the obligation to refund the amount you paid to us.

Withdrawal: Wild Dolphin Project reserves the right to require any participant to withdraw from an expedition at any time if the director deems his or her acts or conduct to be detrimental to or incompatible with the interest, harmony, comfort or welfare of the expedition, the research or the dolphins.

Children: Passengers age 16-18 traveling alone must provide a signed, notarized **Medical Treatment Release** form as part of their application. Please contact us beforehand for restrictions concerning children under 16.

Smoking: Restricted to outside aft deck.

I have read the above statements and cancellation policies.

Print Name

Signature of applicant

Date

Signature of parent/guardian if applicant under 21

Name:-----

Trip Date:-----

Agreement of Liability, Responsibility, Release and Waiver:

Liability and Release: In traveling to and from any WDP research trip and during the trip itself, there are certain risks and dangers, including but not limited to the hazards arising from the forces of nature, from living aboard a ship, from accident or illness without medical facilities, and from travel itself. In consideration of and as part payment for, the right to participate in any WDP trip, I hereby voluntarily assume the risk for all of those and all other reasonable foreseeable hazards, which may be encountered on a WDP expedition. I agree to hold the Wild Dolphin Project harmless from any and all liability, actions, causes of actions, debts, claims and demands of every kind and nature whatsoever, including but not limited to those arising from loss, injury, damage or inconvenience to person or property in connection with any WDP trip. It is further understood by me that while on a WDP research trip, the opportunity may arise for me to leave the safety of the boat and enter the ocean to either swim, snorkel, kayak, participate in research, interact with dolphins or participate in any other water sport activity; that if I choose to do so, it is my own independent, voluntary decision, and I realize that I am exposing myself to the risks (both known and unknown) of nature which may include but are not limited to unpredictable ocean currents and waves, sudden storms, and encounters with ocean creatures. Further, knowing the risks, I certify that I am a capable swimmer and snorkeler choosing to enter the water at my own risk with no liability for the consequences of my decision and actions extending to the Wild Dolphin Project employees, board members or contractors.

I have read and agree with the conditions and the "Agreement of Liability, Responsibility, Release and Waiver" as stated above. I UNDERSTAND THAT I AM WAIVING MY RIGHTS TO SUE IN COURT OR TO SEEK DAMAGES.

Print Name

----- Date:-----

Signature of Applicant

----- Date:-----

Signature of Parent/Guardian if Applicant is under 21

Publication Agreement: The purpose of WDP's Field Participation Program is to study, observe and participate in a research project. In order to protect the research methods and materials, and in some cases to protect the dolphins, it is necessary to restrict publication (defined as the communication of information to the public) of any images, photographs and written materials taken or drawn from your participation in the program. PLEASE NOTE THAT PUBLICATION INCLUDES SOCIAL NETWORKING SITES LIKE FACEBOOK, MYSPACE, YOUTUBE AND ANY OTHER INTERNET SITES. Please also note that underwater and/or surface video is not allowed, this includes small clips on your camera/phone. You can take still photography for your own personal use, but please no video.

It is tempting to want to share you memories with others, but please understand that any images, photographs and written materials are SOLELY for your own PERSONAL use. For any other use, all materials must receive written approval from the Research Director of the Wild Dolphin Project prior to publication.

I hereby agree not to publish any images, photographs or written materials without prior written approval from the Research Director (Dr. Herzing) of The Wild Dolphin Project.

Print Name

----- Date:-----

Signature of Applicant

Agreement and Release Form Regarding Drug Use:

To Whom it May Concern:

I am aware of the United States Coast Guard “zero tolerance” approach to illegal drug use on U.S. waters and on Bahamian waters where the U.S. Coast Guard has jurisdiction. I will not bring aboard or cause to be brought aboard the Wild Dolphin Project’s research vessel any controlled substances. I will inform friends and others on board the vessel that illegal drug possession and/or use will not be tolerated.

I agree to indemnify The WILD DOLPHIN PROJECT, INC. and hold them harmless for any seizure or detention of the vessel caused by my action of possession and/or use of illegal drugs, by any authority or government, including all expenses incurred in recovering the vessel, and including reasonable attorney’s fees, as well as lost revenue for cancelled or delayed trips. Also, I certify that I have not had a drug charge or offense in the past three years.

----- Date:-----
Signature of Applicant

Print Name

Signature of Parent/Guardian if Applicant is under 21

Release of Information

WDP receives many inquiries in regards to other participants who will be potentially on their trip. Should you be willing to make your name/email/trip date available for others to access please sign the below release statement:

Yes, I allow WDP personnel to release my trip plans to others.

----- Date:-----
Signature of Applicant

Reserving Your Spot:

A completed application and full payment (or a minimum deposit to be set by WDP) are required in order for you to reserve a spot on a trip. Please fill out this form completely, sign where indicated, staple all 6 pages together, and return it to us by mail **as soon as possible** and (except by arrangement with this office) no later than 60 days prior to your trip date. Participants under age 18 must also include a signed and notarized **Medical Treatment** Mailing form, which will be provided. Mailing address is **Wild Dolphin Project, P.O. Box 8436, Jupiter, FL 33468**. If it is less than 60 days prior to your trip date, you may fax the application to us at 561-575-5681, then follow up with the original in the mail. Payment may be by check (preferable) to Wild Dolphin Project or by Credit Card. Please contact our office to make arrangements or with any questions, 561-575-5660.

Personal Travel Itinerary

Your Arriving Flight:

Date and time of arrival: _____

Place of arrival: _____

Airline: _____ Flight #: _____

Your Hotel:

Date(s) of hotel stay: _____

Name of hotel: _____

Address and phone: _____

Staying with another participant? Who? _____

Your Departing Flight:

Date and time of departure: _____

Place of departure: _____

Airline: _____ Flight #: _____

IMPORTANT: In case of a last minute change to our schedule (weather, etc.), it is critical that we be able to reach you quickly to inform you of the change. Please provide a phone number where we can reach you during the few days just prior to your trip. Phone (cell, home or business): _____

Person to leave message with: _____

General Travel Information:

PASSENGERS MUST HAVE PROOF OF CITIZENSHIP: US citizens MUST have a valid passport to clear immigrations. Non-US citizens must have passports and citizens from some countries must have visas.

INSURANCE: Please *confirm* that your health/medical insurance policy will cover you in the Bahamas, or purchase a short-term policy for that coverage. You may also wish to protect yourself and your equipment by purchasing *short-term travelers insurance and trip cancellation coverage*, which would reimburse you for non-refundable airfare and Wild Dolphin Project trip costs should you cancel or interrupt your trip, as described on page 2. Both types of coverage are available from your travel agent, insurance company, or Divers Alert Network (DAN).

INCLUDED IN THE TRIP PRICE: The price includes accommodations, meals, snacks, beverages (limited alcohol), leadership, and a professional crew while you are on board Stenella. The price **does not include** Bahamian departure tax, airfare, ground transportation, hotel lodging, entertainment or meals you may choose to purchase ashore, passports, visas, insurance, medical or hospitalization costs, taxi or water taxi, additional expenses arising from delays or extensions of trip due to weather, sickness, failure of transportation, or other causes beyond our control, and any other services not stated above.

SNORKELING: You must bring your own gear. Please practice! Please test your gear beforehand and make sure you are comfortable in the water! We DO NOT carry spare snorkeling gear on board!

MONEY: It is recommended that you bring US currency and travelers checks.

TAX DEDUCTION: In the United States, Wild Dolphin Project is a public charity described by Section 501(c)3 of the Internal Revenue Code. In general, contributions of cash, securities, and property donated by US citizens to support scientific research projects sponsored by the Wild Dolphin Project are tax-deductible. Consult your tax advisor for more information. At the end of the year, WDP will send out information on what portion of your contribution is deductible.

DRUGS: The US Coast Guard has jurisdiction in Bahamian waters and strictly enforces a policy of “zero tolerance” for illegal drugs, and so does WDP. Anyone found with illegal drugs on board will forfeit their trip and be taken back to shore. Prescription medication must be in original container with the label intact and you must make the captain aware of them.

PHOTO EQUIPMENT: Although WDP does not allow personal video cameras on board, you are encouraged to bring a still camera in the water with you! Let us know if you are interested in donating photographs or slides of dolphins to the Wild Dolphin Project.

READING/MUSIC/VIDEO: Bring your favorite reading materials. We also have a CD/cassette player on board for you to enjoy, as long as material does not offend anyone. Many people bring portable music players and e-readers.

PACKING GUIDELINES: Travel light! Please limit luggage to two small soft pieces, since storage space is limited onboard. Suggested items: Long pants, sweatshirt, jacket, windbreaker,(for cooler evenings), shorts, T-shirts, bathing suits, hat, deck shoes (no black-soled street shoes), foul weather gear. Two towels (one swimming/one bathing), washcloth, seasick medication, small flashlight, film, shampoo, sunscreen, lip balm, sunglasses, hat. All snorkeling gear: mask, fins, snorkel, defogging fluid, extra straps, net gear bag. Note: we do NOT supply wetsuits or personal items such as tampons or seasick medication.

SHOWERS: Although we make our own water onboard, fresh water is conserved. Showers are brief and Navy style.

SMOKING: Restricted to outside deck area.

FISHING: By crew only in designated areas.

WATER TEMPERATURE: May: 78-80°F, July through September: ranging to 88°F.

I understand the rules and regulations and will follow them.

Signature_____

Date_____