



TRAVEL INSURANCE DETAILS

Your safety is of the utmost importance to us which is why it is essential that you are adequately covered by a travel insurance policy which covers you whilst on your trip with us. **Please complete this form and return it to CCC, in order that we may keep a record on our files to assist should an incident occur for which you may require medical emergency assistance.**

Name:

Date of Birth:

Destination:

Dates of Travel:

Insurance policy start date:

Insurance policy end date:

Insurance Company:

Policy Reference number:

Insurance company contact telephone number:

24 hour medical emergency assistance helpline number:

If you have any known medical conditions, has this been disclosed to your insurer, as failure to do so may invalidate a potential claim?

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Please see the insurance page in the relevant project summary together with our booking conditions on our website for further information on insurance providers who offer specialist cover for diving.

Declaration:

1. I understand that any expenses incurred in arranging and providing medical emergency and repatriation procedures, will be my sole responsibility. I am aware of the implications of arranging my own travel insurance policy and have read and understood the policy terms, limitations and exclusions. I understand and agree that CCC will not be liable for any costs incurred which fall outside the scope of cover of the travel insurance I have elected to arrange.

2. I have satisfied myself that the travel insurance I have arranged provides adequate cover in respect of scuba diving and/or project work based on the details contained within the booked trip itinerary. I authorize CCC to instigate medical emergency repatriation procedures with my insurance company and their agents if deemed medically necessary.

3. I have checked that my travel insurance covers all medical costs associated with scuba diving, including:
 - Dive training (if applicable)
 - Decompression chambers
 - Unlimited diving (throughout my stay) to a depth of 30 metres.
 - Medical repatriation to my home country
 - Helicopter Rescue.

Signed:

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Date:

Please send completed form to CCC HO via email (preferable) -info@coralcay.org or by post to –

Coral Cay Conservation
The Kiln
Grange Road
Tongham
Surrey
GU10 1DJ

CCC advises volunteers to keep copies of all CCC documentation for their records.