Divers Training & Supply, Inc. P.O. Box 11592, Charleston WV. 25339 Phone: (304) 545-2125 Fax: (304) 744-7891 E-Mail: DiverPRC@gmail.com

_ Trip breakdown of expenses

Depart	i	_		Cost	Desired	Total
*	Shop Expenses / Fees \$50 pp / e	ach day (2)	=	\$100.00		\$
♦	Certification Fee for PADI	3	=	\$ 50.00		\$
•	Each nights lodging pp / per night	ht (double occup.)	=	\$ 75.00		\$
•	Single Room rate pp / per night		=	\$ 95.00		\$
•	Nights lodging in	· -		\$00		\$
•	days entrance fees to Facilit		. =	\$00		\$
•	Days on Dive Boat (=	\$00		\$
•	Food and Drinks for trip (=	\$00 \$00		\$
•	Tank Rentals / Fills @ \$ 12.00 each tank ()			\$00 \$00		\$
*	Wet Suit Rentals @ \$ 20.00 per day ()			\$00 \$00		
*	Regulator & BCD @ \$ 40.00 each per day ()			\$00 \$00		\$
X				\$00 \$00		\$
•	Weight Belt & weights @ \$ 10.00 per day ()			· · · · · · · · · · · · · · · · · · ·		\$
▼	Specialty Class Fee			\$250.00		\$
▼	Advanced Class			\$285.00		\$
•	Nitrox Class (not including fills or equipment)			\$300.00		\$
•	Rescue Class			\$300.00		\$
*	Fuel / Transportation Charge \$50	0.00 / pp each way	=	\$100.00		\$
R	eceipt	Document of Pay / / / Trip One			/ Disbursemen	wo <u>:</u>
	Student's Name	[] Activity:			[] Other:	· · · · · · · · · · · · · · · · · · ·
Date 1	Paid: / /	Notes:				
Check	#:					
	#:					
Amoui			Instr	uctor		Student
Amoui	nt:	******	Instr *****	ructor *******	******	Student *******
Amou **** Name:	nt:	**************************************	Instr *****	uctor *************** tification Status	********	Student *******
Amour ***** Name: Addres	nt: ********************************	**************************************	Instr ****** _ Cert	ructor ************************************	:********** :Zip Code:_	Student ******
Amour ***** Name: Addres Phone:	nt: ****************** s: # (H):(W)	**************************************	Instr ***** _ Cere ity:	ructor ********* tification Status	**************************************	Student ******* Weight:
Amour ***** Name: Addres Phone:	nt: ****************** s: # (H):(W)	**************************************	Instr ***** _ Cere ity:	ructor ********* tification Status	**************************************	Student ******* Weight:
***** Name: Addres Phone: Cell Ph Emerge	nt: ********************************	Age:C Soc. Sec. E-mail :	Instr ****** Certity: #:	uctor ******* tification Status onship:	*********** : Zip Code:_ Height: Fax: Phone	Student ******* Weight:
***** Name: Addres Phone: Cell Ph Emerge Insuran	**************************************	************** Age: C Soc. Sec. E-mail : Poli	Instr ***** Cerl ity: #: Relati	ructor ******** tification Status onship:	**************************************	Student ******* Weight:
***** Name: Addres Phone: Cell Ph Emerge Insuran	******************** s:(W) tone:E ency Contact Information:	**************************************	Instr ****** Cert ity: #: Relati cy Nun	ructor ***********************************	**************************************	Student ******* Weight: #***********************************