

CUBA

Rhythm and Views

A CULTURAL EXPLORATION LIKE NO OTHER!

www.cubarhythmandviews.com

Step 1

Download this PDF to your desktop.

*Note: you will **NOT** be able to fill out the document on a tablet.*

Step 2

Find this PDF on your desktop, open it, and fill out the forms. Save the document.

Step 3

Make your deposit online at <http://cubarhythmandviews.com/reserve-now>; or mail your check to address in step 4 below to avoid a 3% processing fee.

Step 4

If you are submitting this contract via email, please be sure to type your name into the electronic signature fields on pages 3, 5, 8, and 9 where indicated. This will serve as your electronic signature.

If you are submitting a hard copy of this contract via mail, please sign pages 3, 5, 8 and 9 where indicated. Mail to: Cuba Rhythm and Views, 1982 E. Oxford Drive, Tempe, AZ 85283. Along with two printed copies of the information page of your passport.

Note: For pages 8, 9 and 10, do not be concerned about including address in Cuba or flight information. Cuba Rhythm and Views will add this information.

Full Name (as on passport):

Home Address:

Birth Date:

Birth Place:

Passport Number:

Expiration Date:

Citizenship USA OTHER

Gender: F M

If not a U.S. citizen, # of Alien Registration Card or Visa:

Email:

Daytime Telephone:

Evening Telephone:

Fax:

Mother's Maiden Name:

Emergency Contact Number:

Requirement for those traveling under a SPECIFIC LICENSE to Cuba – Please Initial Acceptance

Under the U.S. Government travel restrictions to Cuba, I understand I will be traveling under a license issued by the U.S. Treasury Department and that my arrangements are conditional on the authorization of my participation under this license. I also understand that Cuba Rhythm and Views can only make my arrangements in accordance with the terms of this license.

Attached is the information and picture page from my current passport.

PLEASE INDICATE FOR WHICH TRIP YOU ARE APPLYING

<u>Dates (check one below)</u>		Occupancy		Final Payment
		<u>Double</u>	<u>Single</u>	<u>Due Date</u>
March 29 - Apr 5, 2017	Bremerton Symphony	\$4,775	\$6,075	Dec 29, 2016
	<i>after Nov. 28:</i>	\$5,750	\$7,050	Dec 29, 2016
May 3 - May 10, 2017	Byron Stripling	\$5,750	\$7,050	Feb 3, 2017

Do you speak Spanish?

Have you traveled to Cuba before? If yes, when and for how long?

Occupation and position

Do you have any dietary restrictions?

CANCELLATION AND REFUND POLICY

Please carefully review attached terms and conditions beginning on page 5.

DEPOSIT AND PAYMENT SCHEDULE

Please indicate:

- I wish to have single accommodations
- I plan to share accommodations with
- I'd like to know about possible roommates

NOTE: If paying with a charge card, a 3% service charge will be added to the cost. We invite you to mail your check and avoid this service charge.

TOTAL TRIP COST (see schedule above)

DEPOSIT due with application:

\$1,000

FINAL PAYMENT due 90 days prior to departure date (Total minus deposit)**

You will receive an invoice for your final payment to the email address listed on this application. If you are using a charge card to make any payments, a 3% service charge will be included in the final invoice. PLEASE NOTE THAT LAKESHORE MUSIC MAY BE THE PAYEE ON YOUR CREDIT CARD STATEMENT.

Enclosed is my deposit (make checks payable to Cuba Rhythm and Views) OR

Charge my deposit to my Visa Mastercard American Express Discover

CARD #

EXPIRATION DATE:

SECURITY CODE:

AUTHORIZED CARDHOLDER SIGNATURE:

DATE:

VISA INFORMATION*:

All travelers must have a valid passport and a Cuban visa. You are responsible for having proper documentation on your person to enter Cuba as well as to re-enter the United States and proper documentation to travel via a third country (if necessary) to Cuba. The Cuban Government retains the right to grant or deny visas.

*Very Important: Persons born in Cuba, no matter what your current citizenship, will require additional documentation. Please contact our office for further information.

BAGGAGE:

The air carrier allows each passenger to bring on the flight **44 pounds of baggage (checked and carry-on)**. For **INTERNATIONAL** flights, the air carrier's liability for lost or damaged bags is limited to the actual value of the baggage, but not more than approximately \$9.07 per pound in the case of checked baggage and \$400.00 per passenger for unchecked baggage. If however, you declare a higher value for your baggage and pay an additional charge therefore **in advance**, the air carrier's liability will be higher. You must submit your claim to the air carrier or to us within 3 days of the charter flight. Your claim must include a copy of the Baggage Check. Unless the Baggage Check specifies the actual weight, we will presume that each checked bag weighs 44 pounds. In this case, liability is limited to \$400.00 per checked bag.

RESPONSIBILITIES:

Cuba Rhythm and Views (CRV) and its employees, shareholders, officers, directors, successors, agents, and assigns, neither own nor operate any person or entity which is to, or does, provide goods or services for these trips or tours. Because CRV does not maintain any control over the personnel, equipment, or operations of these suppliers, CRV assumes no responsibility for and cannot be held liable for any personal injury, death, property damage, or other loss, accident, delay, inconvenience, or irregularity which may be occasioned by reason of (1) any wrongful, negligent, willful, or unauthorized acts or omissions on the part of any of the tour suppliers, or other employees of agents, (2) any defect in or failure of any vehicle, equipment, instrument owned, operated or otherwise by any of these suppliers, or (3) any wrongful, willful, or negligent act or omissions on any part of any other party not under the supervision or control of the Operator (4) sickness, weather, strikes, hostilities, wars, terrorist acts, acts of nature, local laws or other such causes. All services and accommodations are subject to the laws and regulations of the country in which they are provided. CRV is not responsible for any baggage or personal effects of any individual participating in the trips arranged by CRV. Individual travelers are responsible for purchasing a travel insurance policy, if desired, that will cover some of the expenses associated with the loss of luggage or personal effects.

TERMS AND CONDITIONS

Please review attached terms and conditions before signing your agreement. Terms and conditions begin on this page of this application packet.

If you are submitting via email, please type your name below. This will be your electronic signature. If you are mailing, please sign a hard copy.

SIGNATURE:

NAME:

DATES OF TRAVEL:

ADDRESS (STREET):

CITY:

STATE:

ZIP:

LIABILITY RELEASE STATEMENT:

I have read the disclaimer stated above and I hereby release and discharge Cuba Rhythm and Views, its agents, employees, officers, directors, shareholders and successors from and against any and all liability arising from my participation in this trip. I agree that this release will be legally binding upon myself, my heirs, successors, assigns and legal representatives; it being my intention to fully assume all risk of travel and to release Cuba Rhythm and Views from any and all liabilities to the maximum permitted by law.

TERMS AND CONDITIONS OF TRAVEL:

These Terms and Conditions apply to all *Cuba Rhythm and Views (CRV)* programs. The participant understands and accepts that the program fee must be paid, and a Passenger Profile must be completed and signed at least 65-days prior to departure.

The Participant Profile includes:

- Profile Checklist
- Agreement and Release
- Participant Information Form
- Air Travel Application Form
- Two legible copies of your U.S. Passport

1. Payment Policy

1.1 The participant has agreed to pay the applicable program fee in U.S. Dollars.

1.2 A deposit of U.S. \$1,000.00 is due at the time of enrollment in a CRV cultural exploration. This deposit shall be non-refundable unless CRV receives written notice of cancellation not later than 150 days prior to the scheduled departure from Miami.

1.2.1 The remainder of the program fee and the completed Passenger Profile are due 65 days prior to the participant's program start date. If the program fee is not paid in full 65-days prior to start date and has not been granted an extended due date, or the Passenger Profile is not completed, the participant will be cancelled from that program.

1.2.2 If a Participant enrolls between 31 and 70-days prior to the scheduled start date, the participant has ten days from the date that they have enrolled to pay the remainder of the program fee and to complete their Passenger Profile. If the program fee is not paid in full or the Passenger Profile is not completed ten days succeeding the date of enrollment, the participant will be cancelled from that program.

1.2.3 When enrolling within 30 days of the program start date, the program fee must be paid in full immediately and the Passenger Profile must be promptly completed.

2. Cancellation and Refund

2.1 CRV reserves the right, at its sole discretion, to reject any individual at any time prior to start date or to cancel the program start date in which a participant is scheduled to participate.

2.2 In the unlikely event of such a cancellation or if a participant has been rejected, the total amount paid to CRV will be refunded, unless the cancellation is either due to non-payment by the agreed-upon due date or failure to submit the Passenger Profile 60-days prior to the participant's program start date. Other than such refund, CRV will not be responsible to the participant for any other refund, costs, interest, liability, or damages of any kind.

2.3 If a participant cancels for any reason, the participant must notify CRV in writing. The cancellation will be effective upon CRV receipt of the written notification at its office.

2.4 CRV incurs substantial administrative and planning costs prior to the departure of a participant. Therefore, regrettably, if a participant cancels his or her participation in the program, funds paid by the participant to CRV can be refunded only as set forth below in Section 2.5.

The U.S. \$1,000.00 deposit will not be refunded if participant cancels 150 days or less prior to departure from Miami. Participant, however, may apply the U.S. \$1,000.00 deposit (minus administrative and planning costs) to another CRV program to be scheduled within 12-months of the scheduled start date, subject to space availability. The non-refundable deposit is only eligible for use within one year from the original start date.

2.5 If the cancellation is effective

- Up to 90 days prior to the scheduled start date, the program fee paid, less the deposit and applicable airline cancellation penalties, will be refunded.
- 90 to 61 days prior to the scheduled start date, participant will be charged 25% of the program fee and the balance, less the deposit and applicable airline cancellation penalties will be refunded.
- 60 to 45 days prior to the scheduled start date, participant will be charged 50% of the program fee and the balance, less the deposit and applicable airline cancellation penalties will be refunded.
- 44 to 31 days prior to the scheduled start date, participant will be charged 75% of the program fee and the balance, less the deposit and applicable airline cancellation penalties will be refunded.
- Within 30 days prior to the scheduled start date, no portion of the program fee is refundable.

2.6 If a participant has canceled his/her program, he/she has the option to leave the funds on file for up to one year from the original start date toward another CRV program OR to be refunded based on the terms set forth in Section 3.5.

2.7. If a participant has canceled his/her program and chooses a refund rather than leaving the funds on file, the participant will forfeit any/all existing funds remaining on their account, including the use of his/her deposit.

2.8 It is very important that a participant understands the cancellation policy. If it is not clear, the participant should ask for clarification. CRV cannot make exceptions to this cancellation policy for any reason, including medical emergencies. CRV strongly urges the participant to purchase trip cancellation insurance.

2.9 No refunds will be given for unused portions of the program or because of a participant's failure or inability to participate in the CRV program.

2.10 A participant is responsible for transportation to the start location. The participant is also solely responsible for any airfare or other travel fees, charges, expenses, or penalties that might result from any cancellation of or change in the participant's program, whether the participant cancels the program or it is cancelled or altered by CRV.

3. Changes to Program Start Date or Program Type

3.1 CRV will allow participants to change their program start date or type of program, dependent on program availability. In addition, participants are able to use their deposit on file or funds on file, as per the cancellation and refund policy in Section 3, to register in a new program and/or program start date.

3.2 If a participant chooses to change his/her program start date or program type (or cancel their program and re-register using funds on file or a deposit on file) between 60 and 31 days before the original start date, a non-refundable U.S. \$50 Change Fee will be assessed.

3.3 If a participant chooses to switch his/her program start date or program type (or cancel his/her program and re-register using funds on file or a deposit on file) between 30 and one day(s) before the original start date, a non-refundable U.S. \$200 Change Fee will be assessed.

3.4 The Change Fee (or cancellation and re-registration using funds on file or deposit on file) is non-refundable and non-transferrable to any other programs. A Change Fee will be assessed each time the participant changes the program start date or program type and each time the participant cancels his/her program and re-registers using funds on file or a deposit on file. The Change Fee is assessed at the time of re-registration or at the time the change is made, and is charged to the participant before the remainder of the program fee balance is paid.

3.5 The Change Fee applies to certain groups who cancel at any time after the deposits for the program have been paid, regardless of length of time before the programs. The non-refundable Change Fee for groups who change their program type or program start date (or cancel and re-register using funds on file or a deposit on file) at any time greater than 30 days before the start date is U.S. \$50 per person and is U.S. \$200 per person for these same changes made between 30 and 1 day(s) before the original program start date.

I have agreed to submit this application by electronic means. By signing this application electronically, I certify that my answers are correct and complete to the best of my knowledge. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.



Cuba Travel Services, Inc. (CTS Charters)
RESERVATION FORM AND OPERATOR-PARTICIPANT CONTRACT
 California Office 800-963-2822 Miami Office 305-476-9400

Departure Flight:	Departure Date:	Category: R/T [] O/W [] R [] RP []	Return Flight:	Return Date:
Destination:	Agency #:	Agency Name:	Agency Telephone #:	
Name Shown on U.S. Passport Last Name:		First Name:	Mother's Maiden Name:	DOB:
Name Shown on Cuban Passport (if applicable) Last Name:		Mother's Maiden Name:	First Name:	Second Name:
Email Address:		Gender: Male [] Female []	Country of Birth:	Visa #:

TRAVEL	ENTRY TO:	UNITED STATES OF AMERICA		CUBA	
		[] Passport Country _____ [] Residence [] Other	[] Passport Country _____ [] Other		
DOC	DOC TYPE	DOC NUMBER	DOC EXPIRATION DATE	DOC NUMBER	DOC EXPIRATION DATE

OFAC CATEGORY:	<input type="checkbox"/> Family Visit (515.561)	<input type="checkbox"/> Support for the Cuban People (515.574)
	<input type="checkbox"/> Official Business U.S. Gov't (515.562)	<input type="checkbox"/> Humanitarian Projects (515.575)
	<input type="checkbox"/> Journalist Activity (515.563)	<input type="checkbox"/> Activities of Private Foundations/Educational Institutions (515.576)
	<input type="checkbox"/> Professional Research / Meetings (515.564)	<input type="checkbox"/> Educational for Credit (515.565a)
	<input type="checkbox"/> Educational – People to People (515.565b)	<input type="checkbox"/> Export/Import Informational Materials (515.545)
	<input checked="" type="checkbox"/> Religious Activities (515.566)	<input type="checkbox"/> Export Transactions Authorized by (DOT) (515.533/559)
	<input type="checkbox"/> Public Performance/Workshop/Competition (515.567)	<input type="checkbox"/> Exportation & Reexportation of Internet Services (515.578)

USA Address:	City:	State:	Zip:
CUBA Address:	City:	Province:	Cuba Phone:
In case of an Emergency, please contact	Name:	Telephone:	

PUBLIC CHARTER OPERATOR-PARTICIPANT CONTRACT

THIS AGREEMENT SETS FORTH THE TERMS AND CONDITIONS UNDER WHICH WE, Cuba Travel Services, Inc. in return for payment of the amount indicated as the total charter price, agree to provide you this charter flight.

RESPONSIBILITY: We, as the principal, are responsible to you for arranging the charter flight, provided however, that in the absence of negligence on our part, we are not responsible for personal injury or property damage caused by the air carrier or other suppliers of any of the services offered in connection with the charter.

RESERVATIONS AND PAYMENT: Attached to this Agreement is your Reservation Form. We will confirm the reservation within 7 days after receiving the Reservation Form. If the charter flight is fully booked, we will advise you of alternate travel dates. The ticket will be issued only after the reservation is confirmed, and you must pay the full charter price when the ticket is issued. All checks, money orders, and credit card drafts must be made payable to your travel agent, who in turn must remit payment to Cuba Travel Services, Inc..

CHARTER PRICE: The charter price of \$ _____ represents your cost for a charter flight that departs from _____ on _____ to _____ on _____ and returns from _____ to _____ on _____. Excess baggage charges are NOT included in the charter price and will be collected separately at the airport. All payment at the airport should be in cash.

AIRCRAFT: This flight will be performed by _____, operating a _____ aircraft with _____ passenger seats. This air carrier reserves the right to substitute equivalent aircraft, if necessary.

INSURANCE: health and accident insurance is available. If you are interested in receiving more information about this coverage, please advise your travel agent.

BAGGAGE: The air carrier allows each passenger to check up to _____ lbs. of baggage. Charges for excess baggage over _____ lbs. will be collected at the airport. For INTERNATIONAL flights, the air carrier's liability for lost or damaged bags is limited to the actual value of the baggage, but not more than amounts set forth in the Montreal Convention. Specifically, the air carrier's liability is limited to 1,331 Special Drawing Rights regardless of the number of checked bags. If, however, you declare a higher value for your baggage and pay an additional charge in advance, the air carrier's liability will be higher. You must submit your claim for lost or damaged baggage to the air carrier or to us within 3 days of the charter flight. Your claim must include a copy of the Baggage Check.

SECURITY AGREEMENT: Your payment is protected by two security agreements that we have obtained from (i) Wells Fargo, 111 W Ocean Blvd., #530, Long Beach, CA 90802 and (ii) First Niagara Bank, 200 West Lancaster Avenue, Frazer, PA 19355. Unless you file a claim with us, or, if we are not available, with the Securers within 60 days after the completion of the charter, the Securers will be released from all liability to you under the security agreements.

CANCELLATION AND REFUND: If you cancel your reservation, or if you fail to travel on the charter flight, your right to receive a refund is limited, as set forth below. You must send all requests for refunds to us in writing by facsimile or by overnight mail.

If your notice is received:	8 or more days before departure:	7 to 4 days before departure:	Within 3 days before departure:	At any time, if we resell your seat:
You will receive:	A full refund less a \$75 admin fee	\$ 50% of the amount paid	\$ No Refund	A full refund less a \$75 admin fee

All request for refunds must be mailed or faxed to Cuba Travel Services, Inc. Refunds will be made within 14 days of receipt of your notice of cancellation.

We have no right to cancel the charter less than 10 days before departure except for circumstances that make it physically impossible to perform the charter trip. If that occurs, we will notify you as soon as possible but no later than the scheduled departure date. If the charter is cancelled, we will make a full refund to you within 14 days after cancellation. The rights and remedies made available under this contract are in addition to any other rights or remedies under applicable law. However, we offer refunds under this contract with the express understanding that a passenger's receipt of a refund waives any additional remedies.

INTERNATIONAL FLIGHTS: The operation of the charter flight is subject to the Cuban government granting landing rights. If the air carrier cannot obtain landing rights, the flight will be cancelled, and a full refund will be made to you automatically.

I have read and agree to the terms and conditions of the Public Charter Operator-Participant Contract. I have signed up for the flight specified above and on the Reservation Form.

Signature of Applicant: _____ Date: _____ Passenger's Telephone Number: _____

PLEASE FILL OUT ONE FORM PER PASSENGER. YOU MUST DELIVER THE ORIGINAL BEFORE DEPARTURE



TRAVEL AFFIDAVIT- General/Specific Licenses

I understand that travel transactions related to Cuba must be directly incident to one of the self-authorizing general license purposeful travel categories or travel authorized under the auspice of a specific license granted on a case-by-case basis. Under current US travel restrictions with respect to Cuba, travel-related transactions are prohibited except for the following categories & that by signing my name at the bottom of this Affidavit, I declare that I fall under the category I have checked below.

1. FAMILY VISITS

- 515.561(a). I am traveling to visit a close relative in Cuba, who is (i) a Cuban national, (ii) related to me by blood, marriage, or adoption and (iii) is no more than three generations from me or from a common ancestor, or
- 515.561(a). I share a common dwelling as a family with a generally licensed family traveler authorized under above, and I am accompanying the licensed traveler on a family visit.
- 515.561(a). I am visiting a close relative, who is a U.S. Government employee assigned to the U.S. Interests Section in Havana, or
- 515.561(a). I share a common dwelling as a family with a generally licensed family traveler in 6(a) above, and I am accompanying the licensed traveler on a family visit.
- 515.561(a). I am a person located in Cuba pursuant to full time educational activities pursuant to CFR 515.565 (a) (1) through (4) provided the authorized traveler will be in Cuba for more than 60 days.

2. OFFICIAL BUSINESS OF THE U.S. GOVERNMENT, FOREIGN GOVERNMENTS, & CERTAIN INTERGOVERNMENTAL ORGANIZATIONS

- 515.562. I am an employee, contractor or grantee of the United States government or any foreign government or a representative of an international organization of which the United States is a member, and I am traveling on official business of my government or intergovernmental organization.

3. JOURNALIST ACTIVITIES

- 515.563. I am traveling to Cuba directly to engage in journalistic activities in Cuba. I am regularly employed as a journalist by a news reporting organization, or I am regularly employed as supporting broadcast or as a technical person or a freelance journalist with a record of previous journalistic experience working on a freelance journalistic project or broadcast or technical personnel with a record of previous broadcast or technical experience and whose schedule of activities in Cuba does not include free time or recreation in excess of that consistent with a full time schedule.

4. PROFESSIONAL RESEARCH

- 515.564(1). I am a full-time professional whose travel transactions are directly related to my profession, professional background, or area of expertise, including area of graduate – level full-time study. My research in my full-time professional area will comprise a full work schedule in Cuba and I will not engage in recreational travel, tourist travel, travel in pursuit of a hobby, or research for personal satisfaction only.

5. PROFESSIONAL MEETINGS OR CONFERENCES

- 515.564(2). I am a full-time professional whose travel transactions are directly related to attending a professional meeting or conference in Cuba, which directly relates to my profession, professional background or area of expertise, including are of graduate level full-time study; for which the purpose of the meeting or conference is not to promote tourism in Cuba and whose schedule of activities does not include free time or recreation in excess of that consistent with a full time schedule of attendance at professional meetings or conferences.

6. EDUCATIONAL ACTIVITIES – CFR 515.565

General license for educational activities

- 515.565(a). I am a faculty member, staff person, or student of an academic institution (the "University"), and my travel is incident to (1) participation in a structured educational program in Cuba as part of a course offered for credit by the undergraduate or graduate degree granting academic institution that is sponsoring the program, (2) non-commercial academic research in Cuba specifically related to Cuba and for the purpose of obtaining a graduate degree, (3) participation in a formal course of study at a Cuban academic institution, which will be accepted for credit toward a graduate or undergraduate degree, (4) teaching at a Cuban academic institution by a person, who is regularly employed in a teaching capacity at the University,(5) organization of, and preparation for, educational activities authorized in the Regulations,(6) educational exchanges sponsored by Cuban or U.S secondary schools involving secondary school students participation in formal course of study or in a structured educational program offered by a secondary school or other academic institution and led by a teacher or other secondary school official, (7) Sponsorship or co-sponsorship of noncommercial academic seminars, conferences, and workshops related to Cuba or global issues involving Cuba and attendance at such events by faculty, staff and students of a participating U.S. academic institution.

General license for people-to-people travel.

- 515.565(b). I am traveling to Cuba directly incident to educational exchange not involving academic study pursuant to a degree program and my travel (1) takes place under the auspices of an organization that is a person subject to the U.S. jurisdiction and that sponsors such exchanges to Cuba to promote people-to-people contact; (2) the travel is for the purpose of engaging while in Cuba in a full time schedule of activities intended to enhance contact with

the Cuban people, support for civil society, or promote the Cuba people's independence from the Cuban authorities; (3) Each traveler will have a full time schedule of educational activities that will result in meaningful interaction between the traveler and individuals in Cuba (4) an employee, paid consultant or agent of the sponsoring organization is accompanying the group travel to ensure that each traveler has a full time schedule of educational exchange activities, and (5) the predominant portion of the activities to be engaged in will not be with individuals or entities acting for or on behalf a prohibited member of the Cuban communist Party, as defined by 31 CFR 515.338

7. RELIGIOUS ACTIVITIES IN CUBA

- 515.566. I am a person subject to the U.S. jurisdiction, including religious organizations located in the U.S. and members and staff of such organizations, traveling to Cuba directly incident to engaging in a schedule of full time religious activities in Cuba.

8. PUBLIC PERFORMANCES, CLINICS, WORKSHOPS, ATHLETIC & OTHER COMPETITIONS & EXHIBITIONS

General license for amateur/semi-professional international sports federation competitions

- 515.567(a). I am a person whose travel to Cuba is directly incident to athletic competition by amateur or semi-professional athletics or athletics teams traveling to participate in athletic competition in Cuba provided that (1) the competition is held under the auspices of the international sports federation for the relevant sport;(2) the U.S. participants are selected by the U.S. federation for the relevant sport; (3) the completion is open to the public
- General license for public performances, clinics, workshops, other athletic completion or non-athletic competitions and exhibitions*

- 515.567(b). I am a person whose travel to Cuba is directly incident to participation in a public performance, clinic, workshop, non athletic competition or other athletic competition not covered by (a) above provided that: (1) the event is open to for attendance and in relevant situations participation by the Cuban public;(2) all U.S. profits from the event after the costs are donated to an independent non governmental organization in Cuba or a U.S. based charity, with the objective of promoting people –to-people contacts or otherwise benefiting the Cuban people; and (3) any clinics or workshops in Cuba must be organized and run at least in part, by the authorized traveler

9. SUPPORT FOR THE CUBAN PEOPLE

- 515.574. I am a person whose travel to Cuba is directly incident to promoting independent activity intended to strengthen civil society in Cuba and the schedule of activities does not include free time or recreation in excess of that consistent with a full time schedule

10. HUMANITARIAN PROJECTS

- 515.575. I am a person whose travel to Cuba is directly related to the humanitarian projects in or relation to Cuba that are designed to directly benefit the Cuban people set forth in paragraph (b) of CFR 515.575

11. ACTIVITIES OF PRIVATE FOUNDATIONS/RESEARCH/EDUCATIONAL INSTITUTIONS

- 515.576. I am a person whose travel to Cuba is directly incident to activities by private foundations or research or educational institutions with an established interest in international relations to collect information related to Cuba for non-commercial purposes.

12. EXPORTATION & REEXPORTATION OF CERTAIN INTERNET-BASED SERVICES

- 515.578. I am a person whose travel to Cuba is directly related to the exportation or re-exportation, directly or indirectly, from the United States or for services incident to the exchange of communications over the internet, provided that it is not for promotion of tourism and domain name registration services.

13. TRANSACTIONS RELATED TO INFORMATION & INFORMATIONAL MATERIALS

- 515.545. I am a person whose travel to Cuba is directly incident to exportation, importation, or informational materials as defined by CFR 5151.332 provided that the schedule of activities does not included free time or recreation in excess of that consistent with a full time schedule

14. CERTAIN EXPORT TRANSACTIONS

- 515.533. I am a person whose travel is directly incident to the conduct of market research, commercial marketing, sales negotiation, accompanied delivery, or servicing in Cuba of items consistent with the export or re-export licensing policy of the Department or Commerce (DOC) provided that the schedule of activities does not included free time or recreation in excess of that consistent with a full time schedule

15. Specific License

- I have a specific license from OFAC, which was issued prior to my trip. My OFAC license number is _____.

Name: _____ Address: _____

Date of Birth: _____ Phone Number: _____

I certify that the above information is true and correct. SIGNATURE: _____ DATE: _____

VISA APPLICATION FORM

Surname/Last Name / Family Name: _____

Given Name / First Name / Forenames: _____

Date of Birth: _____ Age: _____
(Day / Month / Year)

Country of Birth: _____

Nationality: _____

Passport Number: _____ Expiration Date: _____

Home Street Address: _____

Home City: _____

Home Zip Code: _____

Home Country: _____

Home Telephone Number: _____

Address in Cuba (or Hotel Name and province): _____

Province or City Staying in Cuba: _____