



OCEANIA CRUISES TRAVEL AFFIDAVIT

I understand that the Office of Foreign Assets Control of the U.S. Department of the Treasury (“OFAC”) administers and enforces the Cuban Assets Control Regulations (“CACR”). I further understand that the CACR prohibits U.S. persons from engaging in travel transactions and from traveling to Cuba, unless they qualify for a general license. I have reviewed the CACR and/or OFAC’s guidance on the travel restrictions.

I, the undersigned, declare and certify that (a) I am subject to U.S. jurisdiction and (b) I qualify for a general license, as marked below. I further confirm that as a licensed traveler, I am obligated to retain all records relating to my travel to Cuba for a period of five years.

I SELECT THE GENERAL LICENSE THAT AUTHORIZES MY TRAVEL:

- 515.561 Family visit
 - 515.562 Official business of U.S. or foreign Government, or intergovernmental organization
 - 515.563 Journalistic activities
 - 515.564 Professional research or meetings
 - 515.565(a) Educational activities – for credit or in connection with degree
 - 515.565(b) Educational exchanges – people to people
 - 515.566 Religious activities
 - 515.567(a) Amateur or semi-professional international sports federation competitions
 - 515.567(b) Public performance, clinics, workshops, other competitions, and/or exhibitions
 - 515.574 Support for the Cuban people
 - 515.575 Humanitarian projects
 - 515.576 Activities of private foundations or research/educational institutes
 - 515.545(b)(1) Activities related to the exportation or importation of informational materials
 - 515.545(b)(2) Activities in connection with the temporary sojourn of aircraft/vessels
 - 515.533(d)(1) Activities related to Department of Commerce licensed or authorized exports
 - 515.533(d)(2) Activities related to professional media & artistic productions
 - 515.559(d) Activities related to the exportation of DOC-authorized medicines & medical supplies
 - 515.570 Returning Cuban nationals
- OR** I will not disembark the vessel while in Cuba to participate in any of the above referenced activities during this sailing.

I solemnly affirm under penalty of perjury that to the best of my knowledge, the foregoing is true and accurate.

Signature of Traveler

Date Signed

Telephone Number

Name of Traveler

Home Address

Ship: _____ Departure Date: _____ Booking #: _____