

Medical Certificate

Participant write-in column

Name	Date of Birth	Age
Address		
Tel		
Courses Check the box you will participate <input type="checkbox"/> Diving <input type="checkbox"/> Introductory Diving <input type="checkbox"/> Snorkeling		

Doctors write-in column

The person in the above box have applied for diving / snorkeling.

This form asks if the participant is in good physical condition suitable for diving / snorkeling.

Diving / snorkeling will be done in the ocean.

In this activity, the participant will swim in the water for about 40 minutes in a wet suit.

Water temperature will be 20 °C in winter and 30 °C in summer.

Depending on the conditions at that time, it can be a very intense exercise.

It may take some time to return to land, or it may be at a location where there is no medical facility nearby.

Therefore respiratory and circulatory systems, the participant must be healthy.

【Doctor Judgement】

- ☐ There are no medical disorders that could be considered unfit for diving / snorkeling.
- ☐ Diving / snorkeling is not recommended.

Opinion

Date	Month /	Day /	Year
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Doctor's Signature

Name of Hospital

Tel
