

MEDICAL HISTORY

The following information is intended for use in the case of an emergency in the event you should be unable to supply it. **PLEASE REMEMBER THAT YOU ALONE ARE RESPONSIBLE FOR DETERMINING YOUR MEDICAL AND PHYSICAL FITNESS TO DIVE OR TO TAKE PART IN ANY OTHER ACTIVITIES DURING THIS TRIP. WE TAKE NO RESPONSIBILITY WITH RESPECT TO YOUR DETERMINATION.** If you have any questions concerning your medical or physical fitness to dive or take part in any such activities, please consult your personal physician.

Please check any of the following items which apply to your past medical history or represent medical conditions:

I am currently taking medications.
Please list medication(s) _____

- I have a history of respiratory problems or disease.
- I am a diabetic.
- I have a history of seizures, dizziness, fainting or blackouts.
- I have had asthma, emphysema or tuberculosis.
- I have a nervous-system disorder.
- I have had a head or back injury.
- I have had decompression sickness (Bends) or another diving accident.
- I have a history of high blood pressure.
- I have a collapsed lung (pneumothorax).
- I have had surgery or a penetrating injury to my chest.
- I am under the care of a physician or have a chronic illness.
- I have a history of sinus problems.
- I have hay fever or other allergies
(include allergies medication) _____
- I am currently suffering from a cold or congestion.
- I am not pregnant.

I am not now suffering nor have I ever suffered from any mental and/or physical disease, illness or disability which would render me unfit for scuba diving, scuba instruction, snorkeling, water-skiing or any other water sports.

I hereby certify that the foregoing is true and correct.

Signature _____ Date _____

GENERAL RELEASE AND AUTHORIZATION

I hereby give Blue Iguana Charters LLC, the absolute and irrevocable right and permission with respect to the photographs and/or videos that have been taken of me or in which I may be included with others.

- a. To copyright the same in Blue Iguana Charters LLC's name or any other name that Blue Iguana Charters LLC may choose.
- b. To use, re-use, publish and re-publish the same in whole or part, individually or in conjunction with other photographs or videos for any purpose whatsoever, including (but not in way of limitation) illustration, promotion and advertising trade.
- c. To use or disclose my name in connection therewith if Blue Iguana Charters LLC so chooses.

I hereby release and discharge Blue Iguana Charters LLC from any and all claims for defamation and invasion of privacy. This authorization and release shall also ensure to the benefit of the legal representatives, licenses and assigns of Blue Iguana Charters LLC as well as the person(s) for whom the photographs or videos were taken.

I hereby certify that I have read and understand the foregoing statement.

Signature _____ Date _____

