

Declaration of Medical Fitness for Snorkelling

Snorkel diving, whether in a swimming pool or in open water, is an activity which requires general physical fitness and good health. It can also do much to generate these conditions, and improve swimming ability and watermanship.

However, anyone with a history of diabetes, black-outs (epilepsy, etc.) perforated eardrums, grommets, high blood pressure or heart disease, any lung or respiratory disorder, dependence on drugs, should not contemplate taking up this sport without first discussing their suitability to do so with a specialist Diving Medical Referee.

Persons wishing to take up snorkelling, with a BSAC Branch or with a Corporate Member of the BSAC Snorkel Training Scheme, **must** complete the following medical declaration. Those with learning difficulties sufficient to produce problems in understanding and remembering the theory and techniques of snorkelling may be disqualified. If the applicant is under 18 years of age, the declaration **must** be completed and signed by a parent/guardian, who is aware of the person's health history. **Remember: the applicant is the one at risk if a false declaration is made.**

The BSAC Branch or Corporate Member reserves the right to insist that the applicant undertakes a full medical examination by a medical practitioner. If anything about the applicant's medical history declared on this form gives them cause for concern. They do this with your safety in mind.

Declaration

To the best of my knowledge, I certify that I/the applicant (*if under 18 years of age*) has not in the past suffered from any of the conditions mentioned in the indented paragraph above. (*In the event that you/the applicant has one of these or any other medical problems, they should be declared here and the opinion of a Medical Referee will be required before training begins. Should there be any change in the applicant's health, he/she is advised to seek an informed medical opinion concerning current fitness for snorkelling.*)

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Name of applicant Date of birth

Address

..... Postcode

Signature of applicant Date

Signature of Parent / Guardian if applicant is under 18 years.

This completed declaration should be given to the BSAC Branch or Corporate Member before training begins, and will be held by them.

Seen by Branch / Corporate Member

- Result:** FIT (Sign up 'Satisfactory Medical Declaration' on appropriate pages of members' Snorkelling Qualification Record Book).
 Refer to GP or Medical Referee for Examination.

MEDICAL REFEREES

(s) = Surgery or Hospital telephone number (h) = Home Telephone number. Where not specified, numbers are believed to be Surgery.
Details given were correct at the time of printing but may be subject to change. If unable to contact, please advise your diving association HQ.

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August 2007. This form is published jointly by:

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