

Carino Wildlife Cruises Risk & Medical Disclosure

For your safety and benefit please complete this form and give to crew.

First Name..... Family Name.....

Age..... Nationality/Country of residence.....

Emergency Contact name & phone #

I have informed the staff of Carino Wildlife Cruises (or will, prior to undertaking the activity) of any medical conditions, previous injuries and any medication I am currently taking which may affect my ability to undertake the activity and understand it is my responsibility to disclose any conditions that may affect the safety and enjoyment of myself and those around me. (ie: heart conditions, asthma, lung diseases, asthma, epilepsy and diabetes.)

I consent to receive any medical treatment that may be deemed necessary by Carino Wildlife Cruises in the event of injury, accident or illness while undertaking the activities.

Do you have any health conditions that we should be aware of? (Such as those above) **Y / N**

Specify:.....

Do you have any Allergies? **Y / N** **If yes please specify:**

Do you have your medication with you? **Y / N**

Do you have any physical disability/injury (e.g. Back, knee or shoulder problems) **Y / N** **Specify:**

I accept that this activity inherently involves risks and potential hazards. The risks/hazards include but are not limited to drowning, falling/tripping on the vessel or off the vessel, unexpected sea movement, sails and associated equipment, swimming/snorkelling, walking on island tracks and equipment failure. Snorkelling can be a strenuous physical activity, even in calm water and there **are serious risks associated with some medical conditions, especially heart conditions.**

1. Ability of open ocean swimming: Poor / Good / Excellent **2. Can you swim 100m (328ft) without help?** **Y / N**

I agree that by signing this “Carino Wildlife Cruises Risk & Medical Disclosure” form:

- I agree to cruise/sail with care, and obey the rules set out by Carino Wildlife Cruises and instructions given by the Skipper/Crew/Guides at all times.
- I understand that if I act recklessly or intentionally, and don't follow the rules or instructions set out by Carino Wildlife Cruises and the guides, which I have been made aware of, Carino Wildlife Cruises will not be held responsible for any injury, damage or loss I cause to myself/my property, or another person/their property, resulting from my action (or lack of action).
- I accept there are inherent risks and hazards associated with participating in the activity and I understand what these risks are (including serious harm and death). ***I wish to proceed with the activity at my own risk. Y / N***
- I am physically and mentally fit to participate and there is nothing I am aware of that will affect my ability to take part in the island and wildlife day cruise. ***I confirm that I am fit enough to participate in this activity. Y / N***
- I am aware that there is no guarantee of dolphins. Carino operates with a Department of Conservation permit, and interaction with them is governed by the Marine Mammal Protection Act.
- We often take photographs and videos for use in social media and Advertising. By signing this form, you agree to the use of those images of yourself being used by Carino Wildlife Cruises for the above purposes. Should you not wish to be included please feel free to let us know on board.
- I understand and acknowledge the above information is true & correct and certify that I comply with the terms above

Signed:..... (If child is under 18, signature of parent)

Date:

All information will remain confidential. Thank you for your co-operation.