



Firstname / Name	
Birth date	
BCD Size	
Date of your next flight	
How did you get to know our center?	
Certification level	
Number of logged dives	
Date of your last dive	
Contact emergency	
Hotel and room number	
E-mail or WhatsApp	

WARNING You have to respect a 24 hours no fly time between your last dive and your return flight.

We invite you to answer the following 12 questions by YES or NO, this will tell us the lead to hold prior to the practice of the scuba diving.

Since your last medical visit with no contraindication to the practice of scuba diving or during the last 12 months:

1	Did a member of your family suddenly die from a cardiac arrest or unexplained cause?	Yes	No
2	Have you experienced chest pain, palpitations, unusual shortness of breath, or discomfort with exercise or after exercise?	Yes	No
3	Have you ever experienced any wheezing?	Yes	No
4	Have you had any loss of consciousness?	Yes	No
5	Near the occurrence of a bone, joint or muscle problem, do you have any pain, lack of strength or stiffness?	Yes	No
6	Did you resume underwater diving after at least 4 weeks of rest for health reasons <u>without consulting</u> a doctor?	Yes	No
7	Have you stopped underwater diving for health reasons?	Yes	No
8	Have you ever had any surgery?	Yes	No
9	Have you started regular treatment prescribed by a doctor (excluding contraception)?	Yes	No
10	Do you have any medical history or health problems that are contraindicated for the practice of scuba diving?	Yes	No
11	Have you had a saturation accident?	Yes	No
12	Have you done one or many sessions in a hyperbaric chamber following a diving incident or accident?	Yes	No

If you answered YES to one or more questions:

You must consult a doctor with this questionnaire and ask him for a medical certificate of no contraindication to the practice of underwater diving.

If you answered NO to all questions:

You can practice diving by presenting the following scuba diving fitness declaration:

*"After completing the self-questionnaire, I undersigned.....
Born on/...../..... nationality declare myself fit for underwater diving."*

Location:, date:/...../..... Signature:

Cancellation policy:

-50% of total price for an activity cancelled the day before the activity.

-100% of total price for an activity cancelled the day of the activity.