

# MEDICAL QUESTIONNAIRE

The purpose of this Medical Questionnaire is to determine if you should be examined by your doctor before participating in freedive activities. A positive (i.e. **"YES"**) response to a question does not necessarily disqualify you from freediving. A positive response means that there is a pre-existing condition that may affect your safety while freediving and you **MUST** seek the advice of a physician prior to engaging in freedive activities. The physician must sign at the bottom of the form to say that they find no medical conditions incompatible with freediving if any **"YES"** box is ticked.

Please answer the following questions about your past and present medical history by ticking the box marked **YES** or **NO**. If you are not sure, answer **YES**.

MEDICAL HISTORY	YES	NO
<b>Neurological Conditions:</b> Especially any history of seizure disorder, stroke, brain surgery, repeated black outs or fainting fits, severe migraine headaches, or aneurysm of the brain's blood vessels.		
<b>Cardiovascular Conditions:</b> Especially heart attack, heart surgery, irregular heartbeat, uncontrolled elevated blood pressure.		
<b>Pulmonary Conditions:</b> Especially a history of spontaneous collapsed lung, collapsed lung due to injury, cysts or air pockets of the lungs, severe damage to lung tissue, emphysema, or any lung problem which interferes with your ability to breathe		
<b>Ear Conditions:</b> Permanent holes of the eardrums, history of ruptured eardrum, permanent tubes in eardrums, severely impaired hearing or hearing loss in one or both ears, or major ear surgery.		
<b>Sinus Conditions:</b> Tumor, polyps, or cyst of the sinus cavities or nasal passages, major sinus surgery, or persistent sinus infection.		
<b>Asthma:</b> History of asthma or asthma attacks. Any history of wheezing caused by exercise, anxiety, cold, fatigue, etc. Any condition requiring medication and/or use of an inhaler for control of wheezing.		
<b>Diabetes Mellitus:</b> Especially Type I Diabetes (Insulin dependent) or Type II Diabetes, which requires insulin or oral medication for control. Any form of Diabetes that is unstable, "brittle" or produces episodes of hypoglycemia (low blood sugar reactions), hyperglycemia (extremely high blood sugar with ketosis) or if there is related kidney disease, eye disease, heart disease or blood vessel disease.		
<b>Pregnancy:</b> If you are presently pregnant or planning to be pregnant.		
<b>Freediving / Scuba Diving Conditions:</b> Previous history of a diving accident, decompression sickness, decompression of the inner ear of air.		
<b>Medication:</b> Any medication taken on a regular basis either over-the-counter or prescribed by a physician.		
<b>General Medical Problems:</b> Any physical and/or emotional condition not mentioned that might affect your safety in an underwater environment or affect your judgment under times of physical or emotional stress.		
<b>A positive test for Covid-19</b> anytime in your past, especially if the infection was associated with any symptoms, or if you currently suffer from symptoms generally associated with a Covid-19 infection.		

I, ..... (name) certify that I have answered the above questions accurately and honestly. I also declare that I will freediving **within the levels of my experience, competence and training with a competent buddy at all times.**

.....  
SIGNATURE

.....  
DATE OF SIGNING

PHYSICIAN TO COMPLETE (If any **'YES'** box was ticked in the Medical Questionnaire)

( ) I find no medical conditions that I consider incompatible with freediving

( ) I am unable to recommend this individual for freediving

.....  
PHYSICIAN SIGNATURE

.....  
NAME

.....  
DATE

.....  
PHYSICIAN STAMP OR CONTACT DETAILS

# LIABILITY RELEASE AND ASSUMPTION OF RISK

PARTICIPANT:

INSTRUCTOR:

EMAIL:

INSTRUCTOR EMAIL:

DATE OF BIRTH:

CENTER:

**I, PARTICIPANT, HEREBY DECLARE THAT I UNDERSTAND THAT FREEDIVING IS AN INHERENTLY RISKY ACTIVITY THAT MAY RESULT IN SERIOUS BODILY INJURY OR DEATH. I KNOWINGLY AND FREELY ACCEPT AND ASSUME ALL RESPONSIBILITY FOR MY PARTICIPATION IN FREEDIVING WITH INSTRUCTOR.**

In consideration of INSTRUCTOR allowing me to participate in freediving activities in connection with Molchanovs Pte. Ltd. ("MOLCHANOVS"), I hereby fully release and discharge from responsibility INSTRUCTOR and MOLCHANOVS, and their respective officers, directors, agents, contractors and any other individuals connected to or acting on behalf of them (including, without limitation, volunteers and other participants)(collectively the "Released Parties") from any and all liability, claims, losses or damages related to my participation in any freediving activity (whether such activity is in connection with MOLCHANOVS or otherwise), including, without limitation, liability, claims, losses or damages resulting from the negligence of any party, including the Released Parties. I agree that if I, or anyone on my behalf, make any claim or demand against any Released Party in connection with my participation in any freediving activity, I will indemnify and hold harmless each such Released party from any loss, liability, damage or cost incurred as result of such claim or demand.

I declare that I am in good mental and proper physical condition to participate in freediving. I am not under the influence of alcohol or any drugs that are contraindicated to freediving. I know of no reason why I cannot or should not freedive.

I am legally competent to sign this liability release. I understand the terms herein are contractual and not a mere recital, and that I have signed this document of my own free will and with the knowledge that I hereby agree to waive my legal rights. I further agree that if any provision of this Liability Release and Assumption of Risk is found to be unenforceable or invalid that provision shall be severed and the remainder of this document will then be construed as though the unenforceable provision was not contained herein.

SIGNATURE OF PARTICIPANT

DATE OF SIGNING

**Parental or Guardian's Consent (required if PARTICIPANT is under 18 years of age).** The undersigned, as the legal parent or guardian of PARTICIPANT, hereby grants permission to PARTICIPANT to participate in freediving activities in connection with the MOLCHANOVS. The undersigned further agrees to all terms of this Liability Release and Assumption of Risk on behalf of PARTICIPANT and to indemnify and hold harmless the Released Parties from any liabilities incident to PARTICIPANT's involvement or participation in such activities.

SIGNATURE OF PARENT OR GUARDIAN

DATE OF SIGNING