



**ASIAN PACIFIC  
ADVENTURES**

## MEDICAL CERTIFICATE REQUIRED

### PART 1: TO BE COMPLETED BY THE PASSENGER

PASSENGER NAME: \_\_\_\_\_

TOUR NAME: \_\_\_\_\_

**YES NO** (Please explain any "YES" answers on the reverse side)

- \_\_\_\_ \_\_\_\_ 1. Do you have any significant medical illnesses which have required the regular care of a doctor? Please explain.
- \_\_\_\_ \_\_\_\_ 2. Do you have any allergies, or have you had any bad reactions to any drugs. Which ones and what effect?
- \_\_\_\_ \_\_\_\_ 3. Have you been hospitalized in the past 5 years? What for?
- \_\_\_\_ \_\_\_\_ 4. Do you take any medications regularly? Please list them.
- \_\_\_\_ \_\_\_\_ 5. Do you have or have you ever been told by a doctor that you had: epilepsy, diabetes, high blood pressure, asthma or lung cancer, ulcers or stomach trouble, heart disease, any significant foot, leg or back problems (require wheelchair), any other diseases or conditions? Please explain.

### PART 2: TO BE REVIEWED AND SIGNED BY: \_\_\_\_\_PASSENGER (OR) \_\_\_\_\_PHYSICIAN

Doctor's signature is required for strenuous, high altitude and /or trips to remote areas. For standard tours passengers may accept responsibility and sign the forms themselves.

The above named passenger, age \_\_\_\_\_, has been examined by me on \_\_\_\_\_ and was found to be physically qualified to participate in an Asian Pacific Adventures trip (see itinerary) which may include some or all of the conditions below:

- \_\_\_\_ Light activity with some walking up to an altitude of 11,000 feet
- \_\_\_\_ Hiking or biking for 1-4 hours a day
- \_\_\_\_ Trips of a 2-4 week duration in remote areas
- \_\_\_\_ Strenuous hiking or biking, averaging 4-6 hours per day of sustained activity, carrying light to heavy loads (not involving any technical climbing)

**NOTE:** Medical facilities may not be available in remote areas. There will be no trip physician.

**Signature:** \_\_\_\_\_ **Print Name & Address:** \_\_\_\_\_

\_\_\_\_\_