

Health Declaration for travelers over 70 years of age

Name of traveler:

Date of birth:

The signing physician is aware of the traveler's plan to participate on a voyage with the sailship Statsraad Lehmkuhl, and that the duration of the voyage varies from 2 to 30 days. The voyage may take place in open sea in demanding surroundings, including much movement of the ship and far from hospitals.

The following questions about the traveler's health need to be answered:

Does the traveler have an unstable lung- or heart condition? Yes No

Does the traveler have an unstable mental condition? Yes No

Does the traveler show signs of dementia or have a tendency of confusion? Yes No

Does the traveler have motoric impairment, reduced coordination or balance which would make it difficult to enter a hammock one meter above ground, walk steep stairs or manage sea motion? Yes No

Does the traveler have an epilepsy, which is not well controlled? Yes No

Does the traveler have impaired vision and hearing to a such degree that it would be difficult to receive instructions? Yes No

Does the traveler have severely impaired night vision? Yes No

Other relevant information about the traveler's health condition:

The signing physician does not see any health hazard for the traveler in participating as trainee on Statraad Lehmkuhl. The signing physician is aware of my duty to inform about medical information that may be relevant for the traveler's health hazard on board.

Full name of physician:

Location and date:

Signature:
