

Pre-Dive Health & Acknowledgment Form/ 1 ~ 3 day Ver.

This form must be completed by the diver themselves once each day, prior to their first dive.

If multiple dives are conducted on the same day, all members of the same team must undergo a verbal health check by the accompanying instructor or tour guide before each dive. If you experience any physical or mental concerns or abnormalities, please do not hesitate to report them. We strongly recommend prioritizing safety and refraining from diving if you have any concerns.

Your Name _____ **Initial Completion Date : dd** ____ **mm** ____ **yy** ____

1. Did you get enough sleep last night and feel well-rested?
2. Do you have a normal appetite today?
3. Are you free from any discomfort or symptoms, such as a hangover?
4. Are you free from fever or flu-like symptoms?
5. Are you free from diarrhea, dehydration, or related symptoms?
6. Are you free from numbness in your limbs or pain anywhere in your body?
7. Are you free from dizziness or lightheadedness?
8. Are your ears and sinuses clear, and can you equalize your ears without difficulty?
9. Have you fully recovered from your previous dive, with no lingering fatigue or body aches?
10. Do you feel physically and mentally ready and willing to dive today?

I have reviewed the above precautions and declare that I have no issues with any of the items listed and that I am able to dive safely of my own volition.

Date of Confirmation	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	Signature (Please print your name clearly)	Verified by Staff
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/	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N		
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