

# Snorkel Diver Registration Form



Before any person can snorkel with Murdoch University, they must complete a copy of this form and forward it to the University Diving Officer for approval. Please note that you may be required to undergo a fitness test, at the discretion of the Diving Officer.

Surname: ..... First Name(s): .....  
Date of Birth: ..... School: .....  
Position at University: .....  
Ph (h & w): ..... E-mail: .....

**Please supply a home address and details of next of kin on the reverse of this form.**

Date started snorkelling? ..... Do you hold a SCUBA ticket? .....  
Date of last diving medical (if applicable): ..... (attach copy of medical if done within last 2 years)  
Details of snorkelling experience: .....  
Approximate hours snorkelling: ..... Date of most recent snorkel experience: .....  
Principal Snorkelling Locations: .....  
.....  
Recreational boat licence: .....  
Details of 1st aid / Oxygen therapy qualifications: .....

## MEDICAL CHECK LIST FOR SNORKELLERS

### Have you ever had:

- 1 Any cardiovascular disease? Y / N
- 2 Any lung disease? (asthma, TB, wheezing, pneumothorax, others) Y / N
- 3 Any epilepsy, convulsions, fits or blackouts? Y / N
- 4 Any serious disease? (such as diabetes) Y / N
- 5 Serious ear, sinus or eye disease? Y / N
- 6 Any neurological or psychiatric disease? Y / N

### Over the last 12 months have you had any:

- 7 Operations, illnesses or treatment? Y / N
- 8 Drugs or medication? Y / N
- 9 If female, are you pregnant? Y / N

### Can you:

- 10 Swim 500m without fins? Y / N
- 11 Swim 200m in 5 min. or less without fins? Y / N
- 12 Equalise your ears when diving or flying Y / N

Signed: ..... Date: .....

**Your Address:**  
**(In Perth)**

Address: .....  
.....  
.....

Contact Phone #: .....

**Next of Kin:**

Name: .....

Address: .....  
.....  
.....  
.....

Country: .....

Contact Phone #: .....

**University Dive Officer Only** Log book checked: ..... Qualifications Checked: ..... Medical  
Received: .....

Induction done: ..... By: ..... Date: .....

Diver Status: .....

Comments: .....  
.....  
.....

University Dive Officer Signature: ..... Date: .....