

Medical Form

Please answer each question, providing detailed information on dates and type of medical treatment. Please attach a separate sheet if necessary. Your signature on this form certifies that your statements are true; and further certifies that you are physically fit and thus are able to meet the requirements of the expedition.

1. Have you ever had frostbite or any related cold weather injury/illness? Yes No Please describe:

2. Have you ever experienced any form of altitude illness? If so, please describe rate-of-ascent, altitude, medication and recovery procedures. Yes No Please describe:

3. List any major accidents, illnesses, or operations you have had in the past five years.

4. List all physical/mental limitations or medical conditions that may restrict your abilities on this expedition.

5. Do you have back or knee problems? Yes No Please describe

6. List any/all medications you will be taking on this trip and why:

7. List any/all allergies to food and/or medication:

8. Dietary restrictions (specify): None Vegetarian Other

9. Do you wear corrective lenses? Yes No

10. Do you smoke? Yes No

11. Are you familiar with standard first-aid and current CPR techniques? Yes No

Medical certifications or qualifications if applicable:

Signature: _____ Date: _____

Printed name: _____

Send completed Medical Form (and all other forms and \$750 deposit) to:

Stray Dogs Adventure Travel
Attn: Marshall Ulrich
515 Brook Drive
Idaho Springs, CO 80452

MEDICAL/HEALTH INFORMATION

The ascent of Kilimanjaro is a strenuous adventure and should not be undertaken if you have any health conditions which may put you at risk. You are strongly advised to consult your physician for a thorough medical check-up and clearance before attempting the mountain. If you are over 50 years old, talk to your doctor about doing a stress EKG.

Should you require any medication whatsoever, you must provide your own and be able to administer it yourself. Medical supplies in Tanzania are not reliable or guaranteed.

Talk to your doctor about the following:

- Vaccinations
 - Hepatitis A
 - Hepatitis B
 - Typhoid
 - Yellow fever
 - Tetanus
 - Polio
 - MMR (measles, mumps, rubella)
- Malaria pills
- Altitude sickness (diamox pills)
- Prescriptions you are currently taking

For more information, go to the Center for Disease Control east Africa Web site at:

<http://www.cdc.gov/cgi-bin/sendit.exe>