

14th International Submarine Races

MEDICAL RELEASE

THE UNDERSIGNED (“Participant”) is participating in the 14th International Submarine Races (“ISR”) taking place in June 2017 at the Naval Surface Warfare Center – Carderock Division (formerly the David Taylor Research Center), Bethesda, MD. In the event of any accident, illness or disability requiring immediate medical treatment and care, the Participant authorizes:

The performance of basic emergency first-aid as may be deemed necessary by the ISR staff, and

The treatment by a physician or medical staff person called by the ISR staff to attend to Participant by examining and performing preliminary transportation of Participant to an emergency room of the local hospital or health care facility if deemed necessary by the ISR staff.

Participant agrees to and authorizes any examinations, tests, treatment and medicine deemed necessary by the attending physician and further agrees to pay the cost and expenses of the treatment(s) described above.

Witness Signature	Signature of Participant
	Dated: _____
Witness Name - Printed	Participant Name - Printed
Address	Address
City, State Zip	City, State Zip
Telephone Number	

MEDICAL INSURANCE INFORMATION:

Insurance Carrier
Policy or ID Card Number

List the Following:

1. Present Medications Being Taken:

2. Known Drug Allergies:

SIGNATURE OF PARENT(S) OR GUARDIAN(S) IF PARTICIPANT IS A MINOR, and by their signature they, on my behalf release all claims that both they and I may have.

(Parent signature if Participant is a minor)	Date
(Parent signature if Participant is a minor)	Date