

Medical Declaration Form



Prior to attending training with OTC Training, students are required to self-declare that they are physically and mentally fit enough to undertake the whole duration of the course and all its activities. This form must be filled out and signed by the student attending the training.

Student Details

Full Name		DOB	
Course Name		Winda ID	

Next of Kin Details

Name			
Contact Number		Relationship	

Medical Conditions

Training delivered by OTC can be physically demanding. Students attending a course with OTC should demonstrate the appropriate physical and mental fitness. As a minimum, we require students to confirm if they have any of the below named conditions. OTC may enquire further about a confirmed condition to ensure the safety of you and everyone attending training.

Please check the options below if you have or have ever had any of the following conditions:

Medical Conditions	Tick to Confirm
Heart related problems, including Pacemakers & Angina	<input type="checkbox"/>
Blood pressure disorders	<input type="checkbox"/>
Epilepsy / Fits / Blackouts or Nerve damage	<input type="checkbox"/>
Vertigo / Dizziness / inner ear problems	<input type="checkbox"/>
Muscular / Skeletal disorders affecting mobility	<input type="checkbox"/>
Alcohol / Drug dependence	<input type="checkbox"/>
Diagnosed mental health condition	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>
Asthma / Respiratory problems	<input type="checkbox"/>
Significant fears of Heights / Water / Confined Spaces	<input type="checkbox"/>
Allergies (please specify below)	<input type="checkbox"/>
Other, please specify:	<input type="checkbox"/>
To my knowledge, I do not have any of the above-named conditions or any other condition that will affect my ability to participate in the training I am attending	<input type="checkbox"/>

PPE Weight Limitations:

Throughout many of our courses, students will be expected to participate in scenarios on our 15m training tower. All personal fall protective equipment has weight limitations. To ensure that these limits are not exceeded, we require a declaration from you that you weigh no more than 126Kg.

I have read and understood the above, I declare my weight to be no more than 126kg/19.8 stone/277.7 lbs

Please note, OTC Training reserve the right to refuse training to any person without the appropriate medical suitability or who is unwilling to provide a completed Medical Declaration Form and/or medical certificate.

The information I have given is true and accurate to the best of my knowledge and I can confirm that I am aged 18 years or older:

Signed: _____ Date: _____

Your personal information will be held in accordance with the General Data Protection Regulation (GDPR). OTC will not disclose such information to any unauthorised person or body. Where appropriate, OTC will use such information in carrying out services and functions. Training may also use such data in connection with the prevention of fraud or other crime.