

*CONFIDENTIAL MEDICAL FORM *

Name of Trek	
Name	Age
PART O	NE (To be completed by participant)
evacuation, or medical supplies and evacuation will be slow and uncertain hazardous terrain. Common and un expected. These include, but are no vomiting, and muscle cramps. Severe oedema. In addition, exposure to a symptoms from a wide array of gast water and prepare food properly. A that can be incurred on these trips. To	ome remote and less developed regions, without means of rapid d facilities. In the event of an accident, illness, or injury an as these trips take place in mountainous, high altitude, or other accommon signs and symptoms of altitude sickness should be t limited to: sleeplessness, coughing, loss of appetite, nausea, cases of altitude sickness can include pulmonary and or cerebral microorganisms unknown to our digestive system may cause trointestinal disorders despite the best efforts to treat drinking poor state of health can greatly increase the dangers and risks herefore, Uttarakhand Trip Trek requires that all climbers and or are properly immunized for the destination (s), and provide the
Place :	
Date :	Signature
PART TW	O DISCLAIMER AND DECLARATION
	Trek/Expedition route in the Himalayas has its shar of risks the terrain, weather, high altitude, and desolate nature.
Accidents on this trek can cause one	to get injure, fall ill, and death too cannot be ruled out.
	n in this trek is completely voluntary, and I am fully aware of the ikhand Trip Trek Tour wholly or partly responsible in case any he trek.
Place :	
Date :	Signature and Name of the Participant
E	mergency contact Information
Name of emergency contact (Family member Only)	
Phone number of Emergency contact:	
Relation with Emergency contact: -	