

Clearance Certificate for Participants of Dolphin Therapy in Marmaris, Turkey
for submission to Onmega Ltd.



Please complete:

Name of patient:

Travel dates:

Do you have any qualms concerning Dolphin Therapy or a flight to, and abidance in, Marmaris, Turkey?

- No, I have no qualms
 Yes, I have qualms that discourage me from the above journey and Dolphin Therapy.
-

Do you have any qualms concerning the therapy being carried out in water?

- No, I have no qualms concerning the therapy being carried out in water
 Yes, I have qualms concerning the therapy being carried out in water

If yes, please give details:

Is a severe illness present?

- No, there is no severe illness present
 Yes, there is a severe illness present

If yes, please give details:

Are there any special risks?

- No, there are no special risks
 Yes, the following risks are to be noted:

Is special medication regularly taken?

- No, no special medication regularly taken
 Yes, the following special medication is regularly taken:
-
-

Please give a short history of the illness:

At which level is the illness to date?

Town/Date:

Stamp/Signature (Doctor):