

National University Polytechnic Institute

3570 Aero Court, San Diego, CA 92123
(800) 432-3483 phone • (858) 309-3510 fax • www.nupolytech.org

Medical Physical Waiver

It is important that you read this entire form and fully understand its terms. After you have done so, please print your name legibly and sign in the spaces provided at the bottom.

Students who enter into a diving related program may be required to submit an approved Medical Physical. Students are expected to be medically fit for diving throughout the duration of the program. Failure to remain medically fit may result in a disqualification.

The weight standards listed below are recommendations set forth by the Association of Diving Contractors International and apply to all students who enter into a program that requires a Medical Physical. If a student exceeds these standards and his/her physician feels the increase is due to muscular build, a variance may be appropriate. Furthermore, individuals who fall within these weight standards but who present an excess of body fat may be disqualified. Students are required to stay within the outlined standards throughout the duration of their program.

Height In. (cm)	Max. Weight Lbs. (kg)	Height In. (cm)	Max. Weight Lbs. (kg)
64 (162.56)	164 (73.80)	72 (182.88)	205 (92.25)
65 (165.10)	169 (76.05)	73 (185.42)	211 (94.95)
66 (167.64)	174 (78.30)	74 (187.96)	218 (98.10)
67 (170.18)	179 (80.55)	75 (190.50)	224 (100.80)
68 (172.72)	184 (82.80)	76 (193.04)	230 (103.50)
69 (175.26)	189 (85.05)	77 (195.58)	236 (106.20)
70 (177.80)	194 (87.30)	78 (198.12)	242 (108.90)
71 (180.34)	199 (89.55)		

Waiver of Legal Action: I, _____, have been informed and fully understand that meeting the recommended weight and height requirements set forth by the Association of Diving Contractors International may be a requirement for acceptance and completion of any program requiring a Medical Physical. I understand that if at any time during my program I am determined to be medically unfit for diving, I may be disqualified from the program. Furthermore, I understand that after the completion of my program, I may be subject to additional medical examinations by industry employers and that failure to meet their medical examination requirements may affect my employability.

I agree for myself, my heirs, successors and assignees, not to prosecute against National University for compensation for any injury suffered by me or any loss or damage to my property during participation in course related activities whether occasioned by negligence of National University or myself. I further agree for myself, my heirs, my successors and my assignees to hold National University and its officers, agents and employees, free and harmless from any and every claim, and to indemnify them against any

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and every claim. I am releasing any claim, which may arise against National University from any and all liability of personal injury, property damage, and/or wrongful death that might result from my participation in diving and other course related activities.

Acknowledgement of Understanding: I have read this medical examination waiver and fully understand its terms. I hereby assume all risk of injury or death, including loss or damage to my property, during the complete course of instruction and related assignments and activities at National University Polytechnic Institute however or wherever the activities occur, including any activities that may be the result of my physical condition.

I understand that I am giving up substantial rights, including my right to take legal action against National University/ National University Polytechnic Institute. I acknowledge that I am signing the agreement freely and voluntarily. I therefore, contend that my signature acts as a complete and unconditional release of all liability to the greatest extent allowed by law.

Student Signature: _____

Date: _____