**HANDS FOR HUMANITY**

**EXTEND A HAND-ENRICH A LIFE**

**Personal Health Questionnaire**

Travel to Ecuador can be physically demanding. Please assess your health in light of the conditions we will experience during the trip. These may include:

-Climatic changes-High temperatures (90-110 degrees F) and/or high humidity.

-Exposure to unfamiliar bacteria due to change in diet.

-Travel in cramped vehicles on rough roads.

-Exposure to diseases that are not present in the U.S.

Name (as it appears on your passport)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you suffer from any health issue or disability which we should be aware of, i.e. heart condition, diabetes, epilepsy, mental illness, allergies (including medications), back problems, emphysema, high blood pressure, etc?

Yes No Explain

Do you carry any medication that the team leader should be aware of?

Yes No Explain

Do you have any dietary restrictions?

Yes No Explain

Do you have hospital and medical insurance which will cover necessary treatment during your trip?

Yes No Explain

Ecuador requires all visitors have health insurance, bring proof of insurance with you.

I represent that I am in good health and further agree to consult my personal physician and/or public health clinic regarding potential health risks and preventative actions to be taken in traveling to the rural and urban areas of Ecuador. I have read the above information and questions thoroughly and have provided accurate answers. I have not withheld any relevant information.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_