

LIABILITY AND GUEST INFORMATION FORM
Theodore Roosevelt Association Guests

***** ACKNOWLEDGMENT*****

By signing below, I acknowledge that I have read and fully understand the warnings contained in the Ship Visitor Statement of Awareness. I have noted any special needs or concerns that I have below.

Print name: _____ **Signed:** _____

Sponsor's Name: LCDR JULIE HOLLAND Sponsor's Department: Public Affairs Officer/USS TR

Desired lunch group seating: A (1000-1200)_____ B (1200-1400)_____

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From: Commanding Officer, USS THEODORE ROOSEVELT (CVN 71)

Subj: SHIP VISITOR STATEMENT OF AWARENESS

1. The following information is provided for your benefit and safety. Please ask if you have any special needs or concerns. To board this ship, **you must be at least 8 years old** and physically able to climb numerous ladders and walk safely about the ship. If you are not 42 inches tall, you must bring proof of age.

2. Due to the arduous nature of shipboard life guests are not permitted to embark with the following medical conditions. By signing above you affirm that **YOU (and/or the above-named minor child in my care) do not have** any of the following physical and/or medical conditions:

- Coronary Artery Disease with symptoms and/or chest pain with exertion
- Have a pacemaker
- Heart attack in the past 6 months
- Current use of blood thinner medications (Heparin, Lovenox, Warfarin/Coumadin, Xarelto)
- Epilepsy or Seizure Disorder
- Active Tuberculosis
- Hepatitis
- Severe Arthritis
- Severe Asthma or Severe Restrictive Airway Disease
- COPD requiring supplemental Oxygen
- Pregnancy
- Movement requiring assistive devices (Walker, crutches, cane, wheelchair, any type of orthopedic upper and lower extremity casts or braces)
- Unable to walk up and down ladders without difficulty

3. **YOU (and/or the above-named minor child in my care)** further acknowledge and will comply with the following: Persons with either Type 1 or 2 Diabetes Mellitus must provide the Medical Department representative a letter from their medical provider demonstrating stable control of blood sugars and medical clearance. Persons with insulin-dependent diabetes must stay on their usual diet and insulin schedule. Persons must carry all necessary medications with them. Persons must understand that medication storage is **not available** on board the ship. **Persons prone to motion sickness** should take motion sickness medication before arriving in the morning, and bring extra medication with them.

Persons who have experienced heat exhaustion or heat stroke are strongly cautioned to drink plenty of fluids both before and during the cruise.

4. Please, watch your step and your head at all times. Ships are full of “knee-knockers” and “head bangers.” These include things such as higher than normal steps up to a brow, pipes in the overhead, low doorways or overheads, high door thresholds, metal ladders, cable lifelines, battle lanterns, fire extinguishers, as well as bitts, cleats, lines, chains, cables and hoses on deck.
5. Do not lose awareness of your surroundings. While there are many interesting things to see aboard, remember that your personal safety is most important. Visitors have been injured when they were focusing on others (a child or elderly guest, for example) and failed to pay attention to their own safety.
6. Appropriate clothing and footwear must be worn (no high heels or flip-flops of any variety will be allowed). By signing this statement, you are asserting that you are wearing proper attire and footwear for visiting a vessel.
7. Do not attempt to use brows or ladders unless you are physically capable of doing so safely. If you have any doubt, please notify your guide immediately.
8. Again, please be aware of the unique nature of a ship that could result in injury if you are not careful, including: uneven deck surfaces; cable lifelines; equipment tie-down chains and cables; open hatches in the deck; sloping brows, ramps or walkways; and brows that roll back and forth on the pier as the ship moves, among other hazards.
9. By coming aboard this ship, you consent to all emergency medical or dental treatment which may, in the professional judgment of the Medical or Dental Officer of USS THEODORE ROOSEVELT (CVN 71), become necessary while you or the above named minor are embarked aboard. Understand that emergency care is treatment to preserve life or prevent further injury and is the only type of care available and authorized for you aboard ship.
10. In an effort to minimize the crowding of the hangar bay seating areas during lunchtime we are splitting up the seating into two groups as marked on your ticket. Group A which will eat between 1000-1200 and Group B which will eat between 1200-1400. Please select your desired mealtime above however understand that depending on ticket sales your desired time may not be available. Please be courteous to other guests and move out of the seating area during lunchtime if you are not eating.

IMPORTANT NOTE FOR ALL GUESTS OLDER THAN 65

All must provide in advance a letter from their doctor on office letterhead that acknowledges the disqualifying medical condition listed above or in the *Friends and Family Cruise Information* document, indicates the guest is in “exceptional physical condition” and in the opinion of the physician, “is at minimal medical risk from the increased physical exercise requirement and austere nature of a ship at sea.”

ALL FORMS TO BE RETURNED TO TRA NATIONAL OFFICE BY JULY 10th.

Scan and send by email to Marie Kutch at mkutch@theodoreroosevelt.org, fax to (516) 921-6481 or mail to arrive no later than July 10th to TRA, P.O. Box 710, Oyster Bay, NY 11771

**Friends and Family Day Cruise
Emergency Data Form (required for ALL guests)
Legal Guardian Consent (required for all guests under 18 whose legal guardian is not aboard)**

For Each Theodore Roosevelt Association Guest

Name: _____ Age: _____

Address: _____

Telephone Number: _____

In case of emergency, contact:

Name: _____ Relationship: _____

Address: _____

Telephone Number: _____

Legal Guardian Consent (for guests under 18 years old, whose legal guardian is not aboard)

I hereby authorize _____ (minor) to embark in USS THEODORE ROOSEVELT (CVN 71)

at NAS North Island on 13 Aug 2019 for a Friends and Family Day Cruise. The

minor's guardian while aboard USS THEODORE ROOSEVELT is _____.

Signature of legal guardian

Signature of sponsor

Special needs or concerns: