

Dorchester Skipjack Committee
P.O. Box 1224
Cambridge, MD 21613
410-228-7141

Initial Fitness Disclosure

Name of Applicant (print): _____

I, the undersigned, recognize that crewing on the skipjack *Nathan of Dorchester* requires a level of physical exertion, stamina, and endurance. The following are examples of tasks that crew members perform, but it is not intended to be a comprehensive or exhaustive list of such activities:

Pulling (horizontal, up, or down), or lifting 50 pounds.

Standing for several hours.

Maintaining balance on a moving deck.

Exposure to outdoor weather, including sun, cold (40° F.), heat (95° F.), or rain (with foul weather gear), for 2 hours.

Absence from professional emergency medical care for a current illness for up to 6 hours.

I certify that, to my knowledge, I have no medical condition or restriction, which might limit my ability to train or function as a captain or crew member of the skipjack *Nathan of Dorchester*. In the past 3 years, I have not had a condition which caused sudden incapacitation, or expectation of same. I agree that, if such a limitation or condition should occur, I will report same to the President of the Dorchester Skipjack Committee. I further agree that I will not serve on board the *Nathan* if I feel that I am unable to fulfill the duties properly.

I further understand that I am being accepted for crew training on a trial basis. After participating in my first training session(s), I understand that a determination will be made on the basis of fitness, aptitude and other factors, as to whether I will be accepted into the crew training program. Acceptance into the crew training program does not guarantee continuation to full crew status.

Crew Member's Signature

Date

Rev. August 5, 2010