

**Royal Enfield Himalayan Odyssey 2025**  
**MEDICAL CERTIFICATE**

(To be completed by the doctor in CAPITAL letters)

<i>Participant's Name</i>					
<i>Blood Group</i>		<i>Height</i>		<i>Weight</i>	
		<b>Normal</b>	<b>Abnormal</b>	<b>Details</b>	
<i>Cardio-vascular system</i>					
<i>Blood Pressure (Readings)</i>					
<i>Pulse</i>					
<i>Respiratory system</i>					
<b>Nervous system</b>					
<i>Central</i>					
<i>Peripheral</i>					
<b>Ear, nose &amp; throat, in particular vestibulocochlear apparatus</b>					
<i>Right</i>					
<i>Left</i>					
<b>Locomotor System</b>					
<i>Arm – Right</i>					
<i>Arm – Left</i>					
<i>Leg – Right</i>					
<i>Leg – Left</i>					
<i>Spine</i>					
<i>Abdomen (Hernia)</i>					
<b>Urine</b>					

Albumen			
Glucose			

<b>IS THE PARTICIPANT DIABETIC ?</b>		
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<b>THYROID OK ?</b>			
<b>IS THE PARTICIPANT ASTHMATIC ?</b>			
<b>Eyes – Distant Vision</b>		<b>Without correction</b>	<b>With correction</b>
Right			
Left			

I, the undersigned certify that in respect of the Royal Enfield Himalayan Odyssey 2024, this person

- Is fit to take part
- Is not fit to take part

Doctor's Name: \_\_\_\_\_

Date: \_\_\_\_\_Signature & Seal

### **Participant Declaration**

I declare to bear the risk of my participation in Royal Enfield Himalayan Odyssey 2025 on the basis of the recommendation above as well as in my own cognizance and that I attest that everything in the medical certificate is true to the doctors and my knowledge.

Participant Signature \_\_\_\_\_