**RIDE ACCESSIBILITY QUESTIONNAIRE**

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| **First Name:** | **Zip Code:** |
| **Last Name:** | **Phone Number:** |

1. **Do you have the ability to maintain proper riding position? Yes No**

Riders must have the body and spinal control to remain sitting upright and maintain proper riding position throughout

rides without the aid of other people or devices even during bumping or other characteristic movements of the rides.

1. **Do you have control of your upper torso including head and neck?** **Yes No**

Riders must have sufficient muscle control to support their heads, necks and upper torsos in the proper riding

position during the ride’s designed dynamic motions.

1. **Do you have the ability to grasp the restraint device with at least one functioning hand? Yes No**

Riders must have a functioning hand or prosthesis with fingers that have the ability to grasp the restraint device. The

grasp must be strong enough to support the rider’s body weight so that the rider may maintain the proper riding position

throughout the duration of the ride.

1. **Do you have the ability to brace with at least one functioning leg? Yes No**

Riders must have at least one functioning leg for bracing themselves during the course of the attraction. A functioning

leg is a lower limb with a foot over which a rider has control. A prosthetic device that can be used for bracing is considered

a functioning leg.

1. **Do you have an amputated limb?**  If YES, proceed to question 6. If No, end of questionnaire.  **Yes No**

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1. **Are you wearing a prosthetic device?** If YES, please indicate below and proceed to question 7.  **Yes No**

If NO, proceed to Question 8.

Arm Leg

1. **Are you able to remove your prosthetic device?** If YES, continue to question 8. If No, end of questionnaire. **Yes No**

Certain attractions do not allow prosthetic devices but will allow guests with residual limbs to ride based on remaining

length.

1. **Do you have two functioning knees?** A functioning knee must be able to bend and have residual limb under the knee joint.

If NO, please answer below **Yes No**

Certain attractions have specific requirements for amputations (example: amputation to the ankle) and for length of residual limbs. Based on the information provided guests may be able to utilize a partial or full body harness to ride those specific attractions.

Length of residual right leg: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of residual left leg: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of residual right arm: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of residual left arm: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE**: ONLY GUESTS WITH MOBILITY IMPAIRMENTS (WHICH GENERALLY REQUIRE THE USE OF ASSISTIVE DEVICES) AND CERTAIN OTHER SPECIAL NEEDS (AND UP TO THREE COMPANIONS) WILL BE GIVEN ACCESS TO SEAWORLD PARKS ATTRACTIONS THROUGH THE ATTRACTION’S DESIGNATED ENTRANCE.

**STATEMENT OF CONFIDENTIALITY**: THE INFORMATION PROVIDED ON THIS FORM WILL BE TREATED AS CONFIDENTIAL. YOUR INFORMATION WILL NOT BE DISCLOSED EXCEPT TO OUR EMPLOYEES IN THE PERFORMANCE OF THEIR JOB DUTIES, TO ANY MEDICAL PERSONNEL WHO MAY BE CALLED UPON TO TREAT YOU WHILE AT SEAWORLD PARKS OR BY OPERATION OF LAW.

**By signing below I certify that my answers to the above are true and correct to the best of my knowledge and that I will read all rider requirements for the rides that are recommended for me.**

Guest Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­