



## Declaration of possession of medical certification

I, \_\_\_\_\_, enrolled in the 9<sup>th</sup> Europ Assistance Relay Marathon of April 7, 2019 in the team number \_\_\_\_\_, declare to be in possession of the medical certificate required to participate in the event, that is, at least one of the following certificates:

A. Certificate of eligibility for the practice of non-competitive sports activities.

*The certificate was issued by my physician or a by a specialist in sports medicine. The examination for the certificate included blood pressure measurement and other exams deemed necessary according to current laws.*

B. Certificate of eligibility for participating in sport events at a competitive level.

*The certificate was issued to me by a doctor with a specialization in sports medicine. The examination for the certificate included blood pressure measurement, electrocardiography exam at rest and under stress, and spirometry exam.*

The certificate in my possession is valid as of April 7, 2019 since it was released less than a year before this date.

I waive S.S.D. RCS Active Team, Timing Data Service s.r.l and Njuko SA from any liability for the inability to verify the certificate itself, impossibility due to my negligence in submitting a copy of the certificate.

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