

SELF DECLARATION OF FITNESS FOR COMPETITIVE SPORTS ACTIVITIES

I, THE UNDERS	IGNED,		
BORN IN		ON//_	
ADDRESS (STREET/SQUARE)			
symptom therefore 2. That I red	nefit from a healthy and so is of diseases or pathology fit to take part in compe	gies that prevent me for titive sports activities; s medical examination	ving never showed signs or clinical rom practicing sports and that I am at a sports medicine center that
HEREBY RELIE	VE THE RIVA DEL GAR TY REGARDING HEALT	RDA VOLUNTEER FIR	ATION ARE TRUE AND THAT I RE DEPARTMENT FROM ANY AM AWARE OF BUT WHICH I
	DATE	/	

I enclose herewith a photocopy of a valid identity document.