

	<b>EMERGENCY COVID-19</b>	
	<b>ANTI-CONTAGION SAFETY PROTOCOL</b> <b>TURIN KAYAK CANOE MARATHON</b> <b>TORINO – 26 – 27 MARZO 2022</b>	

ATTACHMENT 1 – SELF DECLARATION

Undersigned \_\_\_\_\_

Born in \_\_\_\_\_ date \_\_\_/\_\_\_/\_\_\_ and resident in (country)  
 \_\_\_\_\_

Telephone number \_\_\_\_\_

I HEREBY DECLARE:

on my honour that I have not had any of the following symptoms during the last 48 hours:

- Fever or chills;
- Cough or aggravation of my usual cough;
- Unusual fatigue;
- Unusual shortness of breath when I speak or make the slightest effort;
- Unusual muscle aches and/or pains;
- Unusual headaches;
- Loss of taste or smell;
- Unusual diarrhoea.

I hereby declare on my honour that:

I'm fully vaccinated,

Always in the ground race area (inside buildings & outside), I will use FFP2 NR Face Masks and take health precautions.

I do not know I have been in contact with a confirmed case of COVID-19 during the last fourteen days before departure.

Date \_\_\_\_\_

Signature \_\_\_\_\_

	<b>EMERGENCY COVID-19</b>	
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**ATTACHMENT 1A – SELF DECLARATION UNDERAGE**

Undersigned \_\_\_\_\_ parent of \_\_\_\_\_

Born in \_\_\_\_\_ date \_\_\_/\_\_\_/\_\_\_ and resident in (country)

\_\_\_\_\_

Telephone number \_\_\_\_\_

I HEREBY DECLARE:

on my honour that my son/daughter has not had any of the following symptoms during the last 48 hours:

- Fever or chills;
- Cough or aggravation of my usual cough;
- Unusual fatigue;
- Unusual shortness of breath when I speak or make the slightest effort;
- Unusual muscle aches and/or pains;
- Unusual headaches;
- Loss of taste or smell;
- Unusual diarrhoea.

I hereby declare on my honour that:

my son/daughter is fully vaccinated,

In the ground race area (inside buildings & outside), they will use FFP2 NR Face Masks and take health precautions.

I do not know my son/daughter have been in contact with a confirmed case of COVID-19 during the last fourteen days before departure.

Date \_\_\_\_\_

Signature \_\_\_\_\_