

## HEALTH CERTIFICATE

*The first part of this form has to be signed and stamped (or your doctor could copy the whole text on his letterhead paper).*

*If you already have an update certificate just ask your doctor to add the following paragraph, and fill Minors' individual declaration for minors.*

### Fill in CAPITAL LETTERS

Myself Dr. ....

Doctor's address .....

Certificate that Mr/Mrs .....

*(\*) does not present any current pathology or counterindications to participate in athletic activities where major cardiovascular stress is involved (as for Italian law: DM 24/04/2013 and 08/07/2014).*

### DOCTOR'S SIGN and PRINT

date .....

*(\*) sailing courses are based on an intensive activity, require strong endurance and self-control.*

**THIS PART HAS TO BE FILLED (MANDATORY)**

**The student** has to list pathologies or problems which not compromise sailing activity but have to be known (allergies, food incompatibilities or similes) as it could be possible set meals for any need.

.....  
 .....  
**We do suggest to do the anti-tetanic vaccine and carry with you the certification.**

### INDIVIDUAL MINORS' DECLARATION (MANDATORY)

The parent Parental Right Entitled Surname Name .....

Student name and surname .....

Course ..... shift .....

*Declare the student has list pathologies or problems which not compromise sailing activity but have to be known (allergies, food incompatibilities or similes) as it could be possible set meals or for any need.*

Emergency contact name .....

Phone number (with country code) .....

### IMPORTANT

*Myself as Parent / Parental Right Entitled AUTHORIZE the Centro Velico Caprera, under a doctor or hospital request, to take any action on the mentioned minor.*

Date ..... Parent / Parental Right Entitled Sign .....