



**MATTERHORN CERVINO X TRAIL 2018**  
**HEALTH CERTIFICATE FOR HIGH – INTENSITY SPORTS**

Fill and sign this form, then send it by fax +39 0165261127 or by e-mail: info.cervinoxtrailers@gmail.com

I. Dr. (name, surname)

\_\_\_\_\_

Born (city, country)

\_\_\_\_\_

On (dd/mm/yyyy)

\_\_\_\_\_

With offices at (complete address)

\_\_\_\_\_

And phone number

\_\_\_\_\_

**Hereby state**

That Mr / Mrs / Ms (name, surname)

\_\_\_\_\_

Born (city, country)

\_\_\_\_\_

On (dd/mm/yyyy)

\_\_\_\_\_

And resident at (address, city, country)

\_\_\_\_\_

ID document N°

\_\_\_\_\_

According to the results of medical check-ups and examinations, is healthy and currently fit for high intensity competitive sports in general and for the marathon in particular.

This certificate is valid until  
(dd/mm/yyyy)

\_\_\_\_\_

*This certificate must be valid 1 Year.*

Date (dd/mm/yyyy)

\_\_\_\_\_

*Physician's  
signature and  
stam*

\_\_\_\_\_

Personal history records are held at the main offices of ASD Cervino Trailers, via Roma 11028 Valtournenche (Aosta - Italy) and may be reviewed, altered and deleted at any time upon the individual's requests, and addressed to the legal representative responsible for the handling of said records.