

ALPAGO ECOTRAIL

The certificate is in accordance with Italian law. However in order to make sure that we treat all the certificates sent from different countries correctly, it is compulsory to use this form, no other will be accepted. This medical certificate has to be filled in, dated and signed by the doctor, specialist in sports medicine, who usually stamps it or specifies his professional number (if he is not an Italian doctor).

Nobody will attend the race without the medical certificate.

Italiano	English
Certificato medico sportivo per attività agonistica. DM 10 febbraio 1982	Medical certificate
Nome	First name
Cognome	Surname
Data di nascita ___/_____/19__	Date of birth ___/_____/19__
Luogo di nascita	Place of birth
Sesso	Sex
L'atleta sopra identificato, sulla base della visita medica e dei relativi accertamenti clinici risulta idoneo alla pratica agonistica dello sport Atletica leggera. Il presente certificato ha validità annuale dalla data del rilascio.	The athlete identified above, on the basis of medical and related clinical findings is eligible to practice competitive running This certificate is valid for one year from date of issue.
Nome del Medico	First name of the doctor
Cognome del medico	Surname of the doctor
Data ___/_____/20__	Date ___/_____/20__
Firma del medico	Signature of the doctor
Timbro del medico	Professional stamp/seal (or professional number):_____