



HEALT SELF-DECLARATION

(in compliance with art. 47 of D.P.R. n. 445/2000)

I, the undersigned _____ born in _____ on
_____ and resident in _____, City
_____ State _____, aware of the criminal liability in
case of mendacious declaration as provided for by art. 76, Presidential Decree n.
445 of 28 December 2000

DECLARE

that my physical condition, as accepted by my country medical structure, allows me
to compete in archery event.

Date _____

Signature

This document personally undersigned must be delivered via email to the
address info@romaarcherytrophy.com, or directly on the accreditation desk
after your arrival