

HEALTH DECLARATION

Bib Number:

Name of the running competition (hereafter "Event"):

I, undersigned (title, full name):

Residing in (street, postcode, town, state):

Born (date):

Health Insurance Company:

Hereby declare, that I do not have any / have these health problems (please specify):

.....
.....

I hereby declare that I am sufficiently prepared to participate at the Event, and that I am participating voluntarily and on my sole responsibility. I have read the Propositions of the Event, the organizational rules of the Event and the instructions of the Organizer - Dream Production s.r.o. I am aware that an event of this nature places an increased physical and mental burden on my person, and I declare that I am not aware of any obstacle to my health that would prevent me from participating in this Event. I declare that I am aware that I bear all responsibility and risks associated with my participation in this Event. I bear all responsibility for any damage caused by me to the health or the property of the Organizer or other partners of the Event, or to me and my property, or to any third parties who in some way participate in the Event, before, during and after the Event. I declare that in case of injury or damage to my health or property, I will not enforce damages to the Organizer, or other natural or legal persons associated with the organization of the Event.

I declare that all the information provided are correct and true. I confirm the declaration with my signature (or the signature of my legal representative):

In Prešov, (date):

Signature:

Contacting person in the case of a threat to life, health or property

Name and Surname:

Phone Number:

CONSENT OF THE LEGAL REPRESENTATIVE

For the participants younger than 18 years:

I undersigned, hereby declare that as a legal representative for the minor
I have fully understood the Health Declaration with all its consequences and understand all potential risks of the participation at the Event. and understand all potential risks of the participation at the Event. I am fully aware of all potential risks or injuries incurred in connection with the minor's participation in the event and assume all responsibility for the minor in the case of any damage incurred to their health or their personal property during the Event and will not enforce damages to the organizer of the Event and that all its consequences pass to me.

I declare that all the information provided are correct and true. I confirm the declaration with my signature

Name and Surname of the Legal Representative:

ID Number:

Relation to the participant:

In Prešov, (date):

Signature of the Legal Representative:.....