

Self-Certification form for events SARS-CoV-2 free _ Individuals

The undersigned

UCI CODE

Born in

the / /

Resident in

Address

Participant as

MEDIA

RIDER

TEAM STAFF

OTHER

I hereby state, under my responsibility

A) I have read and understood the information relating to the regulatory protocol of the measures for contrasting SARS-CoV-2 described in the UEC Bulletin Information

B) I have been informed and I have understood the obligations and requirements for the containment of the infection by SARS-CoV-2 for the events described above.

C) I'm aware of the obligation not to enter the event areas with fever (over 37.5 °) or other flu symptoms and to call your family doctor and the competent Health Authority.

And therefore, I report

during the last 14 days I haven't been in contact with people infected with Covid-19

I do not suffer from flu symptoms (cough, breathing difficulties, huge tiredness, loss of smell, ...)

I've been healthy in the last 14 days with no symptoms related to SARS-CoV-2

Date of my personal RT-PCR test: ____/Nov/2020

Day of declaration: ____/Nov/2020

Faithfully (signature) _____