

**SELF-CERTIFICATION EMERGENCY COVID-19**

The undersigned SURNAME: \_\_\_\_\_ NAME: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Place of Residence: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

**DECLARES UNDER HIS OWN RESPONSIBILITY**

- THAT SHE / HE HAS NOT BEEN EXPOSED TO DIRECT INFECTION BY COVID-19 OR RESULTED POSITIVE AT ANY TEST (SEROLOGICAL OR BUFFERING)
- THAT SHE / HE HAS NOT BEEN OR IS NOW SUBJECT TO ANY RESTRICTIVE QUARANTINE MEASURES RESULTING FROM COVID-19 CONTAMINATION
- THAT SHE / HE DIDN'T VOLUNTARILY COME INTO CONTACT WITH PEOPLE EXPOSED TO DIRECT INFECTION BY COVID-19 IN THE LAST 30 DAYS

**SHE / HE CONFIRMS**

- TO BE AWARE OF THE RISK INHERENT IN RELEASING FALSE STATEMENTS
- TO BE AWARE OF THE PROVISIONS CONCERNING SOCIAL DISTANCING, PERSONAL HYGIENE AND ANY ATTITUDE CONSIDERED TO BE AT RISK BY THE REGULATIONS IN FORCE FOR THE NON-PROLIFERATION OF COVID-19 INFECTION
- TO READ, APPROVE AND COMPLY WITH THE BASIC RULES SET OUT BY THE "ASSOCIAZIONE A.S.D. PARACADUTISMO BELLUNO" CONCERNING THE SKYDIVING AND THE GROUND ACTIVITY IN THE ASSOCIATION'S RELEVANT AREA
- TO BE AWARE THAT NON-COMPLIANCE WITH THESE RULES MAY LEAD TO THE EXCLUSION FROM THE ACTIVITY AND THE REMOVAL FROM THE ASSOCIATION AREA

**SHE / HE FURTHER DECLARES**

- TO RELIEVE THE "ASSOCIAZIONE A.S.D. PARACADUTISMO BELLUNO" FROM ANY LIABILITY DUE TO NEGLIGENCE IN COMPLIANCE WITH THE RULES AND WITH REGARD TO THE STATEMENTS PROVIDED
- TO WATCH OVER THEIR OWN AND OTHERS SAFETY, DISCOURAGING AND COMMUNICATING ANY ATTITUDES CONSIDERED TO BE AT RISK
- TO HAVE IN THEIR PERSONAL EQUIPMENT THE MINIMUM NECESSARY TO PERFORM THE SKYDIVING ACTIVITY (SUIT, HELMET, GLOVES AND MASK)
- FOLLOW AND COMPLY WITH THE GUIDELINES PROVIDED BY INSTRUCTORS AND FIELD STAFF FOR BOTH, COMMON AREAS AND AIRCRAFT BEHAVIOUR

**Belluno, date since the day: \_\_\_\_\_ -to day \_\_\_\_\_ / \_\_\_\_\_ /2021**

**(READ AND SIGNED)** \_\_\_\_\_