

IMC SAILING CAMP VENICE (ITALY) 2018

Health Certificate

I declare that the participant is in good health sufficient to undertake strenuous water sport activity such as sail training, canoeing and rowing.

() The participant has no dietary requirements

() Dietary requirements as follows:

.....

Remarks:

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Signed Date

This form must be signed only by a qualified medical professional.