

**IMC SAILING CAMP VENICE (ITALY) 2019**

**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.