



**SELF-CERTIFICATION OF GOOD HEALTH STATUS FOR  
THE ITALIAN COUNTRY WESTERN DANCE CHAMPIONSHIP  
TO BE HELD NOVEMBER 15-17, 2024 AT  
VILLAGGIO AZZURRO NOVARELLO**

I, the undersigned.....born on .....  
to.....Country of origin .....  
despite having been informed by the organizers of the event of the compulsory  
requirement of the medical certificate of good health status in Italy (Article 7 of Decree Law  
September 13, 2012, n.158 (in force since 14/09/2012)), I DO NOT SUBMIT IT for the  
following reason:

- A) in my country of origin there is no such document;
- B) in my country of origin the cost of producing such a document is extremely expensive  
and to obtain it it is necessary to undergo check-ups, blood tests, etc.

In view of the above, I declare that I am in good health, that I am fit to practice sporting  
activities and that I assume all responsibility for anything that may happen to my state of  
health during the course of the event in question, consequently releasing the organizers  
themselves from any responsibility.

Full name in capital letters .....

Signature .....

Child's full name in capital letters .....

Parent's signature if minor .....

Date .....