Name and last name	
Place of birth	
Current address (street, number, town, pr	ovince)
	Telephone
-	ue and correct and am aware that I shall be liable to prosecution if any ound to be false, under article 495 of the Italian Criminal Code.
I hereby de	eclare, under my own responsibility, that:
I am aware of the health and safety reg	ulations currently in force;
• I am aware of the COVID-19 containmen	nt measures in force on the date of registration;
• my body temperature is below 37,5° C. 84/2020;	Temperature can be taken at any point in accordance to legislation RER
• I have not tested positive to the COVID-:	19 virus nor am I showing symptoms;
 I have not been exposed to confirmed currently subject to quarantine restriction 	d or suspected cases of COVID-19 in the past 14 days, and I am not
• I will endeavour not to take part in the e	event should COVID-19 related symptoms arise.
Ferrara, Date	Declarant's signature

This self certification must be signed and handed in at the moment of registration on the day of the event