

Entry form to: **602°** *Palio del drappo verde di Verona*

Please dont write here

Surname + Name

date of birth (DD/MM/YYYY)

gender

Nation

Name of Federation

Name of CLUB

telephone

e-mail

By signing this form, the competitor declares to know and fully accept the rules of the event. By registering, the competitor also consents to the processing of the personal data only in compliance with the Italian legislation referred to in UE Rules n. 679/2016 (DGPR).

(date)

(signature)

Attached copies:

- of the bank transfer
- of the Athletic Federation Card (or the Fidal Runcard)
- of the medical certificate issued in your country