



## RESPONSIBLE HEALTH DECLARATION REGARDING COVID19

I responsibly declare:

1. That during the last 14 days and at this time:
  - a) I do not present any symptomatology compatible with Covid-19 (fever, cough, respiratory distress, malaise, diarrhea...) or any other infectious condition.
  - b) I have not been positive/iva for Covid-19 nor have I lived with people who are or have been positive.
  - c) I have not been in close contact with any person who has been Covid-19 positive or who has had symptoms compatible with this disease.
2. That I will endeavor to keep my vaccination schedule up to date.
3. That, in the case of having fever or presenting any of the symptoms compatible with Covid-19, I will abstain from attending and participating in the event and/or activities. Likewise, I will inform those responsible for the same organization of my condition.
4. That I have read the protocols of prevention, hygiene and safety provided by the Sports entity, and I agree to comply responsibly in its entirety the guidelines contained therein. I also accept that in case of non-compliance with any of them I may be excluded from the sport activity.
5. That I know the obligation to inform those responsible for the sport activity of the appearance of any case of Covid-19 in my environment and to maintain close contact with those responsible for any incident.

I, for the record, for the purpose of participating in sports activities organized by the entity KLASSMARK - NO NATURE NO FUTURE, I sign this declaration of responsibility and explicitly consent to the processing of the data contained in this statement.