

## AFFIDAVIT – COVID 19

Name and surname .....

Date and place of birth: .....

E-mail:..... Mobile ph. num:.....

**I declare that I am entering the race Autoslalom of Vysoke Myto - on the basis of meeting one of the following conditions:**

***(choose the appropriate box)***

- I have a valid certificate of passing the PCR Test (not older than 7 days)
- I have a valid certificate of passing the antigen test (not older than 72 hours)
- I have a valid Covid-19 certificate (not older than 180 days)
- I have a valid certificate of completed vaccination (14 days or more have passed since the last or single dose)

**I further declare that I feel completely healthy and I don't know the circumstances under which I could become infected with COVID-19 in recent days.**

Place .....

Date .....

.....  
*signature*