



# 24° Mezza Maratona "Città di Palmanova" 29/11/2026 SELF-DECLARATION, HEALTH CHECK-LIST AND TERMS & CONDITIONS

**Important notice.** This form may be filled in (a) electronically - by completing the editable fields on the PDF or by hand-compilation in capital letters of a printed copy. **The signature, however, must be affixed exclusively by handwritten signature** on the printed form, subsequently scanned in colour at a minimum resolution of 300 dpi, in a clearly legible and integral form. Any other form of signature - including handwriting drawn directly with a mouse, finger or stylus on a graphic tablet, typed signatures, image-stamps, scanned signatures pasted into the file or simple electronic signatures without certification - **shall NOT be accepted** and shall render the declaration invalid for participation. The completed form, signed in compliance with the above, must be sent to **ENDU** together with the required attachments, within the deadlines indicated in the General Rulebook. The Italian-language version of the General Rulebook prevails in case of inconsistency.

In compliance with the Italian Law, Article 47 of D.P.R. n. 445/2000, I, the undersigned (Runner):

<b>Name</b>	
<b>Surname</b> (Family Name)	
<b>Born in</b> (City)	
<b>On the</b> (DD/MM/YYYY)	/ /
<b>Nationality</b>	
<b>Sex</b>	<input type="checkbox"/> M <input type="checkbox"/> F
<b>Country</b>	
<b>Emergency Contact</b> (Phone Number including National Prefix)	

Pursuant to Articles 46 and 47 of Presidential Decree No. 445 of 28 December 2000, and being aware of the criminal liability provided for by Article 76 of the same Decree in the event of false statements and mendacious declarations, I, the undersigned, declare as follows:

1. MINIMUM AGE. I am at least 18 (eighteen) years old as of 29/11/2026, as required by Article 3.3 of the General Rulebook.
2. HEALTH DECLARATION. I declare that I am in suitable physical condition to participate in the event and that I have truthfully and completely filled in the health check-list and emergency information contained in this form. I acknowledge that participation in a road-running event involves physical effort and may entail health risks, including sudden medical events.
3. NO OFFICIAL RANKING AND NO PRIZES. I acknowledge that, as a non-competitive participant under Article 3.3 of the General Rulebook, I will receive a different-coloured bib, I will not appear in any official ranking and I will not be entitled to any prize, award or classification benefit.
4. COMPLIANCE WITH RULES AND INSTRUCTIONS. I undertake to comply with the General Rulebook, all safety instructions, all instructions given by the organisers, volunteers, medical staff, police forces, local authorities and race officials, and all applicable laws and regulations.
5. ASSUMPTION OF RISK AND RELEASE OF LIABILITY. I acknowledge that participation in the event is potentially dangerous and I voluntarily assume all risks connected with participation, including, by way of example, falls, collisions or contact with other participants or vehicles, road-surface conditions, weather conditions, heat, cold, dehydration, sudden medical events, physical effort and any other foreseeable or unforeseeable event connected with road-running participation.  
For myself and on behalf of my heirs, successors and assigns, I hereby release, discharge and hold harmless Eventi Sportivi Palmanova A.S.D., its directors, officers, members, volunteers, collaborators and agents, the Municipalities of Palmanova, Trivignano Udinese and Santa Maria la Longa, the Italian Red Cross – Comitato Locale di Palmanova, Assistenza e Servizi di Emergenza ONLUS, all sponsors, suppliers and technical partners, Endu, MySdam, EvoData, FIDAL and any other person or entity involved in the organisation of the event, from any claim, demand, damage, liability or action of any kind arising out of or in connection with my participation, save in cases of wilful misconduct or gross negligence and save for mandatory rights under Italian law.
6. SEVERABILITY. If any provision of this declaration and/or any provision of the official rulebook is held to be invalid, void or unenforceable, in whole or in part, the remaining provisions shall remain valid and enforceable to the fullest extent permitted by law.
7. INCORPORATION BY REFERENCE. The General Rulebook of the 24th Half Marathon "Città di Palmanova", published on the official event website, is hereby expressly incorporated into this declaration by reference and forms an integral and substantial part hereof. I confirm that I have read it in full and accept it. In case of conflict between this declaration and the General Rulebook, the provision more protective of Eventi Sportivi Palmanova A.S.D. shall prevail, save for mandatory rights under Italian law.

**A HEALTH CHECK is required before participating in 24° Mezza Maratona "Città di Palmanova".**

Each runner must check the following and join the race on his/her responsibility.

Please consult immediately your primary care doctor/physician/general practitioner and ask if you are fit to participate in the race if any of the following items (a.1 to a.6) are applicable to you. Before running, please, have a physical examination and a cardiac examination under the supervision of your primary care doctor/physician/general practitioner. You are not required to submit any medical certificates. This health check list is aimed to assist your own health check. If you join the race, you are responsible for your actions.

a.1 Are you currently undergoing treatment for, or have you ever been diagnosed with a cardiac disease (myocardial infarction, angina pectoris, cardiomyopathy, valvular disorder, congenital heart disease, irregular heartbeat, etc.)

a.2 Have you ever suddenly lost consciousness (fainted)?

a.3 Have you ever felt chest pain or dizziness when you were training, running or practicing any sport?

a.4 Have any of your relatives suddenly died because of a so-called "heart failure" (sudden death)?

a.5 Has it been more than a year since your last physical examination?

a.6 Do you suffer, or have any of your relatives suffered, of epilepsy or seizures?

**IF YOU ANSWERED YES TO ONE OR MORE OF THE A.1-A.6 QUESTIONS, YOU MUST ASK YOUR PRIMARY CARE DOCTOR/PHYSICIAN/GENERAL PRACTITIONER IF YOU ARE FIT TO PARTICIPATE BEFORE APPLYING FOR THIS RACE.**

The following items (b.1 to b.5) are risk factors for myocardial infarction and angina pectoris. Please consult immediately your primary care doctor/physician/general practitioner and ask if you are fit to participate in the race if any of these are applicable to you, and keep your physical condition stable before participating in the race.

b.1 Is your blood pressure high and/or do you suffer from hypertension?

b.2 Is your blood-sugar level high, or have you ever been diagnosed with diabetes?

> If you have been diagnosed with diabetes, while running or during your everyday life, have you ever suffered from hypoglycemia?

b.3 Do you have a high LDL cholesterol level or have a high neutral fat level (hyperlipemia)?

b.4 Do you smoke (including e-cigarettes)?

b.5 Do you suffer from asthma?

**IF YOU ANSWERED YES TO ONE OR MORE OF THE B.1-B.5 QUESTIONS,** you have to discuss with your primary care doctor/physician/general practitioner your required physical examinations before participating and based on the results he/she will tell you whether you are able to participate or not in the race. Your primary care doctor/physician/general practitioner can help you manage your health and physical condition.

**Privacy Notice (GDPR)**

Eventi Sportivi Palmanova A.S.D., as Data Controller, collects and processes participants' personal data for purposes related to the management of the sporting event, including registration, participation, bib and race-pack distribution, timing services, rankings, emergency contacts, operational communications, and compliance with legal, fiscal, sporting, and safety obligations. The processed data may include: identification and contact data, sporting and registration data, emergency-contact details, health data necessary for medical assistance and safety management, images and audio-visual recordings of the event, as well as technical data generated through the digital platforms used. The processing is based on the performance of the participation contract, compliance with legal obligations, protection of the participant's vital interests, explicit consent where required, and the legitimate interest of the organiser. Health data may be processed exclusively for rescue operations, medical assistance, safety, insurance, and compliance purposes. The provision of the required data is mandatory for participation in the event. Failure to provide the necessary data, including health data required for safety and assistance purposes, may make participation impossible. The use of images and recordings captured during the event constitutes a condition of participation. Personal data may be communicated to sports federations, timing and event-management providers, healthcare and rescue entities, insurance companies, public authorities, professional advisers, media, and communication partners, within the limits of the purposes indicated and in compliance with the GDPR. Personal data shall be retained only for the time strictly necessary to fulfil the purposes of the processing and in accordance with the retention periods required by applicable law, including for fiscal, insurance, legal-protection, and dispute-management purposes. The data subject may exercise the rights provided under Articles 15–22 GDPR, including the rights of access, rectification, erasure, restriction of processing, objection, data portability, and withdrawal of consent. The data subject also has the right to lodge a complaint with the Italian Data Protection Authority.

**I, the undersigned, declare:** that the information provided in this form is true and complete; that I have read and understood the Health Check-List and confirm that I am fit to participate in the event under my own responsibility; that I have read and accepted the General Rulebook and the Terms & Conditions of participation; that I have received and read the Privacy Notice pursuant to Regulation (EU) 2016/679 (GDPR).

Signature of the runner. \_\_\_\_\_



Current Date and Place: \_\_\_\_\_



Specific approval pursuant to Articles 1341 and 1342 of the Italian Civil Code. I specifically approve the following clauses: Art. 3 – No official ranking and no prizes Art. 4 – Compliance with rules and instructions Art. 5 – Assumption of risk and release of liability Art. 6 – Severability Art. 7 – Incorporation by reference

Signature of the runner. \_\_\_\_\_



**In Italy and in Europe dial 112 on your mobile phone for any Emergency Call.**