



SPORT ACTIVITY _____

LIABILITY RELEASE FORM (FOR ADULTS)

Name _____ Surname _____
Born in _____ Date _____
Resident _____ Street _____ N° _____
Tel. _____ Email _____

PREMISE THAT

1. I voluntarily request to participate in the activities that **San Giuseppe SSD** organizes
2. I am aware of the fact that the practice and use of the structures, if not carried out correctly, can pose risks to the physical safety of me and other users

I DECLARE

1. to be in possession of medical certification:
 - for the suitability of non-competitive sporting activity
 - for the suitability of competitive sporting activity
2. to be in suitable psychophysical conditions for the activity
3. to be aware of the risks, foreseeable and unpredictable, connected to the practice of the activity

I ALSO DECLARE

4. to assume from now on any and all responsibility regarding my person, for personal damage and/or obtained from others (and/or things).
5. to relieve San Giuseppe SSD, its collaborators and/or employees, as well as their heirs and/or assignees from any liability for injuries, death and/or any damage (even caused to third parties) that may arise to my person on the occasion and because of the activity carried out at its facilities.
6. to have carefully read and evaluated the contents of this document and to have clearly understood the meaning of every single point before signing it. I fully understand and agree with the purposes of these rules established for my safety and that not respecting them can place both me and other users in a dangerous situation. For the purposes of the articles. 1341 and 1342 of the Civil Code, I declare to specifically approve points 3 (knowledge of risks), 4 (assumption of responsibility) and 5 (assumption of responsibility towards the association) of this document.

Place and date

Signature



SPORT ACTIVITY _____

LIABILITY RELEASE FORM (FOR MINORS)

Name Parent _____ Surname Parent _____

Born in _____ Date _____

Resident _____ Street _____ N° _____

Tel. _____ Email _____

As parent/guardian of:

Name _____ Surname _____

Born in _____ Date _____

Resident _____ Street _____ N° _____

PREMISE THAT

1. I voluntarily request to participate in the activities that **San Giuseppe SSD** organizes
2. I am aware of the fact that the practice and use of the structures, if not carried out correctly, can pose risks to the physical safety of me and other users

I DECLARE

1. to be in possession of medical certification:
 - for the suitability of non-competitive sporting activity
 - for the suitability of competitive sporting activity
2. to be in suitable psychophysical conditions for the activity
3. to be aware of the risks, foreseeable and unpredictable, connected to the practice of the activity

I ALSO DECLARE

4. to assume from now on any and all responsibility regarding my person, for personal damage and/or obtained from others (and/or things).
5. to relieve San Giuseppe SSD, its collaborators and/or employees, as well as their heirs and/or assignees from any liability for injuries, death and/or any damage (even caused to third parties) that may arise to my person on the occasion and because of the activity carried out at its facilities
6. to have carefully read and evaluated the contents of this document and to have clearly understood the meaning of every single point before signing it. I fully understand and agree with the purposes of these rules established for my safety and that not respecting them can place both me and other users in a dangerous situation. For the purposes of the articles. 1341 and 1342 of the Civil Code, I declare to specifically approve points 3 (knowledge of risks), 4 (assumption of responsibility) and 5 (assumption of responsibility towards the association) of this document.

Place and date

Signature
