

**SELF-DECLARATION IN ACCORDANCE TO THE ARTICLES N. 46 AND 47 OF D.P.N.R N.445/2000**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the undersigned, living in (country and city)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ telephone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, aware of the penal consequences provided for in case of false statements in front of pubblic officials, (art. 495 of the Penal Code), **DECLARE UNDER MY OWN RESPONSIBILITY THAT:**

* I do not present any symptom of COVID-19, such as body temperature over 37,5°C, coughing, sickness exc.
* I am aware of the regulatory measures for the containment of COVID-19 existing to this date
* I am aware of the other measures and limitations provided for ordinances and other administrative measures taken in accordance to the existing regulations
* I am aware of the sanctions provided for by the art. 4 and 19 of Decree-Law of March 25, 2020 and by the art. 2 and 33 of Decree-Law of May, 16 2020.
* To be in possession of Green Pass certification or certificate of antigenic swab not earlier than 48 hours or medical certificate of exemption.

I, the undersigned, am committed also to **QUICKLY NOTIFY** the facility in case of a positive COVID-19 test, taken shortly after my visit, in order to allow the facility to quickly take any action needed.

Remember that these data will be treated with maximum respect of the privacy, and will be eliminated after 14 days.

Signing this declaration, I also commit myself to respect the pool regulations exposed in the building.

CAVALESE, DATE SIGNATURE

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