



A RESIDENTS IN ITALY, WITHOUT LICENSE

PLEASE VERIFY THAT...

- RUNCARD has sent you the appropriate medical examination request form that you will have to hand in when you go for exams. You can also find it at **page 3**.
- on the certificate there is the wording «certificato di idoneità all'attività sportiva agonistica»
- on the certificate there is the wording «Art. 5 - D.M. 18/02/82»
- on the certificate the sport for which the certificate was issued is «atletica leggera»

THE CERTIFICATE IS NOT VALID IF...

- it contains the wording «attività sportiva non agonistica», «attività ludico-motoria» or similar
- it contains the wording: «ad uso privato», «a livello occasionale», «atleta non avente la qualifica di agonista», «per persone non indicate dall'Art. 5» or similar
- instead of «athletics», terms such as «podismo», «running», «maratona», and the like are used
- disciplines other than «athletics» are mentioned, for example: «triathlon», «ciclismo», «calcio», etc.

PARTICULAR SITUATIONS TO CONSIDER

- the certificates issued in Lombardy must be issued on a special form that shows the logo of the region in the header
- certificates issued in Veneto, from a private sports medicine center and before 25/04/18, must be endorsed by the ULSS

B RESIDENTS ABROAD, WITHOUT LICENSE

According to the rules of the Italian Republic and the Italian Athletics Federation, to participate in a marathon in Italy, a foreign athlete who is not registered for an Athletics Federation must:

- provide a **medical certificate** (issued in his/her country) in compliance with the legislation on health protection in competitive sports practice in force in Italy
- possess a **RUNCARD** (issued by the Italian Athletics Federation) valid at the date of the race

HOW THE CERTIFICATE MUST LOOK LIKE?

The official form to be handed to your doctor is the one you find at **page 4** (in English) or at **page 5** (in French).

We recommend that you use this form only to avoid problems. If you already have a medical certificate, and you want to know if it's accepted, contact us in time (info@milanomarathon.it).

MEDICAL EXAMS IN YOUR COUNTRY ARE TOO EXPENSIVE?

You can sustain the exams in Milan, in the days immediately before the marathon, at a cost of 60 Euros. You can book it online, check the official website in a few months!

IT SEEMS COMPLICATED, ARE THERE ANY ALTERNATIVES?

Yes, you can sign up for a running club that is a member of the Athletics Federation of your country! Check the website:

www.iaaf.org.

C ATHLETES WITH LICENSE FROM A FOREIGN FEDERATION

To participate, just provide your license information and **self-certification of the license status**, using the form that you can find at **page 6** (in English) or at **page 7** (in French).

Medical Certificate
Competitive sport activity

The undersigned(licensed physician), on the basis of the medical tests:

- medical visit
- test of urines (urinalyses)
- electrocardiogram at rest and stress test
- spirometry

diagnostic tests as by the Italian law to be able to practice competitive sports activities (Ministerial Decree 18/02/1982).

certify that

NameSurname.....

Born.....in.....

Resident in.....in.....

can practice competitive Athletics sport activity.

This certificate is valid for.....

and will expire on.....

Date,

The Doctor

(stamp e signature)

Certificat medical
Activités sportives compétitives

Le soussigné..... (médecin autorisé) sur la base d'une
évaluation médicale effectuée:

- examen physique,
- examen complet de l'urine,
- un électrocardiogramme au repos et après l'exercice,
- spirométrie,

inspection conforme aux tests diagnostics prévus par la loi applicable en Italie
pour être en mesure de exercer des activités sportives compétitives (Décret
Ministériel 18/02/1982).

certifie que

Nom.....Prenom.....

né le.....à.....

et résident à.....

en.....

peut exercer des activités sportives compétitives d'Athlétisme.

Ce certificat est valable pour

et prendra fin le.....

Date,

Le Médecin

(timbre et signature)



DECLARATION

athlete licensed or registered for a Foreign Federation

First Name, Last Name

born on (dd/mm/yyyy)

born in (city, country)

nationality

gender (M/F)

resident at (complete address)

declares that

is registered for or licenced by the following IAAF Federation:

Federation name

Club / Team (if applicable)

Card number / code (if applicable)

I hereby declare myself fully responsible for this declaration, acknowledging the legal consequences of a false statement.

DATE (dd/mm/yyyy)

SIGNATURE



DÉCLARATION

athlète licencié ou enregistré pour une Fédération Étrangère

Prénom, Nom

né le (jj/mm/aaaa)

Né à (ville, pays)

nationalité

sexe (M/F)

résident à (adresse complète)

déclare que

est inscrit ou licencié par la Fédération IAAF suivante:

Nom de la Fédération

Club / équipe (le cas échéant)

Numéro / code de la carte (le cas échéant)

Je déclare être entièrement responsable de cette déclaration, en reconnaissant les conséquences juridiques d'une fausse déclaration.

DATE (jj/mm/aaaa)

SIGNATURE