



Medical Certificate

This medical certificate has to be filled in, dated and signed by a doctor, who usually stamps it or specifies their professional number.

Participants are required to email scanned copy of this certificate to info@trekka.id before 30 July 2022. Your registration will be subject to cancellation if this certificate is not received by the specified date.

Should you have any queries relating to this please contact the Organizer on info@trekka.com

I, the undersigned doctor certifies that the medical examination of:

First Name : _____ Family Name: _____

Date of birth : _____

Does not reveal any contraindication to the practice of competitive running.

Name of Doctor: _____ Date: _____

Signature : _____ Professional Stamp (or professional number): _____

