

Pre-Entry Form Roma Ecomaratona

BLOCK LETTERS ONLY

Surname:

Name:

Nationality:

Date of birth:/...../.....

Sex:

Address:

Zip Code:

State:

City:

Nation:

Telephone:

Mobile:

Email:

Fax:

SIGNATURE

.....

Send fax at No. +39 06 71077050 / +39 06 71073477

The athlete declares to fully understand and acknowledge – having taken awareness from the website

www.romaecomaratona.it

the contents of the Rules and Regulations for the Roma Ecomaratona, which must be considered as here reported.

Please note that the enrollment will only be considered valid just if it includes the acceptance of personal data processing. This acceptance-form can be downloaded from www.romaecomaratona.it, and it must be sent to ASD Roma Ecomaratona, filled in all the parts. In case of lack of sensible data processing's in-writing acceptance, the registration at the manifestation can't be formalized.