



**CHATEAU DE CHANTILLY TRIATHLON 29TH AND 30th AUGUST 2020,
PART OF THE CASTLE SERIES**

To be handed over at registration when you collect your race pack.

MEDICAL CERTIFICATE

(to be filled in by a Doctor)

I, the undersigned, Dr

hereby certify that I have today examined Mr/ Mrs / Miss

..... and have not found any obvious reason

why they should not take part in a competitive sporting event.

Signed at(place)

Date

Signature

Both signature and practice stamp are obligatory.