

Permission to give personal information and COVID19 test result to Team Official/Coach and to race organizers

First name:

Lastname:

Date of birth:

I hereby give my permission to Mehiläinen Ltd give my Covid-19 test result to my Team Official/Coach

| | |
|--------------------------|-----|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |

I also give my permission to Mehiläinen Ltd give possible positive Covid19 test result to the race organizers

| | |
|--------------------------|-----|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |

Place and date: _____ / _____ 2020

Signature _____