



PARTICIPANT DECLARATION

OF THE MAYDAY 10.11.2021

IN ACCORDANCE WITH THE RECOMMENDATIONS OF THE CHIEF
SANITARY INSPECTOR DURING THE SARS-CoV-2 OUTBREAK IN
POLAND.

I, the undersigned [name and surname]:

Hereby declare that, to the best of my knowledge:

1. I am / I am not * a person fully vaccinated against COVID-19;
2. I am not infected with the SARS-CoV-2 virus, causing the disease COVID-19;
3. I am not in quarantine or under epidemiological surveillance..

* cross out unnecessary

date and handwritten signature:

Show this statement at the entrance and keep it with you throughout the duration of the event.