

PISTOIABETONE ULTRAMARATHON 50km

REGISTRATION FORM – 45th edition – June 26th 2022

Tel. 389.6452997 / Fax 0573.34761
 info@pistoia-abetone.net
 www.pistoia-abetone.net

Surname	Name	Date of birth	Sex
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F
Address	Town	Postcode	Prov/State
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E-mail	Telephone	Nationality	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Sport Club	Club code		
<input type="text"/>	<input type="text"/>		

Sport card:	Medical certificate:	Finish line / Race fee	until April 30, 2022	until May 31, 2022	until June 18, 2022
<input type="checkbox"/> FIDAL	<input type="checkbox"/> Competitive	<input type="checkbox"/> Abetone (km 50)	€ 40,00	€ 50,00	€ 65,00
<input type="checkbox"/> RUNCARD / RUNCARD EPS		<input type="checkbox"/> San Marcello (km 30)	€ 22,00	€ 27,00	€ 32,00
<input type="checkbox"/>					

Sport card nr.	Non-competitive walks:	until June 24, 2022
<input type="text"/>	<input type="checkbox"/> Free Walking S.Marcello - Abetone (km 20)	€ 13,00

UIISP National Championship	UIISP card nr.	<input type="checkbox"/> € 10,00 free contribution for downloading up to 50 fotos of the race.
<input type="checkbox"/> UIISP Card	<input type="text"/>	Photo service by the NPO «Regalami un sorriso» www.regalamiunsorriso.it

<input type="checkbox"/> IUTA card (Ascent Running Italian Championship)	Method of payment (payee: ASCD "Silvano Fedi" Pistoia)
<input type="checkbox"/> AVIS blood donor (National Championship)	<input type="checkbox"/> Bank transfer - IBAN: IT27 C 08673 13802 000000610981 (Chianti Banca)

Reservations:	Promotions:
<input type="checkbox"/> Bus seat (Abetone – Pistoia 5:00 am)	<input type="checkbox"/> Registered in the "50 km di Romagna 2022" (€ 5 refund at bib number withdrawal)

I declare to know and accept the rules of 45th Pistoia-Abetone Ultramarathon of 26th June 2022 (published on www.pistoia-abetone.net). I declare to be in possession of suitable medical certificate in compliance with D.M. 18/2/82, 28/2/83, 24/4/13. I also declare, under my personal responsibility, for saying the truth (art.2 Law 4/1/68 No. 15 as amended by article 3, paragraph 10 Law 15/5/97 n.127) and raise organizers from any criminal or civil liability for damages to persons and / or property caused by me or by me suffered. According to D.lgs. 196 of 30/6/2003 (Code relating to the protection of personal data) I give my consent to the use of my personal data for purposes related or instrumental to the organization of the race and to form the historical archive of the race.

Attach copy of the sport card and medical certificate and receipt of payment.

Date _____ Signature _____