

HEALTH RECORD

Name

Date of Birth.....

Address.....

Country

Important medical conditions/disabilities (e.g. Epilepsy, Diabetes, Asthma)

.....
.....
.....

Medical Treatment, drugs, special diet

.....
.....
.....

Allergies, Sensitivities

.....
.....
.....

I hereby declare that the above named person is in reasonably fit health to compete at the WKC World Karate & Kickboxing Commission Championships in Dublin, Ireland, October 30-November 4, 2016.

Doctor's Signature.....

Doctor's Stamp

Date.....