

**CERTIFICATE OF NO CONTRAINDICATION
TO THE PRACTICE OF SPORT IN COMPETITION**
(Article L231-2 and Article L231-3 of the Sports Code)

I, the undersigned Doctor

.....,

certify that I have examined this day

Mrs., Mr.....

Birthday : Age

and didn't find out any apparent clinical signs contraindicating
the practice of sport, **including in competition.**

Certificate made to serve and enforce what is right on the request
of the person concerned and delivered by hand.

Doctor's stamp and Signature

At On