

Place,

**Messrs. FORMULA IMOLA S.p.A.**

The undersigned .....  
born on ..... in ..... prov ..... state .....  
residing in ..... prov ..... state .....  
street ..... n ° .....

pursuant to and for the effects provided by the D.P.R. n. 445 of 28.12.2000, aware of the penalties provided for by art. 76 by the same Presidential Decree 445/2000 for the hypotheses of falsehood in false deeds and declarations indicated therein, under his own personal responsibility

**DECLARE**

to be aware of the behavioral rules to be adopted, listed below:

- **ACCESS DENIED** to all those who in the last 14 days have had contact with people who have resulted positive for Covid-19 or who come from red areas.
- **ACCESS DENIED** to all those with flu symptoms (body temperature > 37.5 ° C and respiratory tract diseases).
- **OBLIGATION TO LEAVE** avoiding contact with anyone, after entering into the circuit, for those having flu symptoms (body temperature > 37.5 ° C and affections of the respiratory tract), informing immediately the FORMULA IMOLA staff.
- **OBLIGATION TO RESPECT** the provisions indicated in the health and safety markings present, relating to COVID-19.
- **LIMIT YOUR OWN PRESENCE** only to the areas interested in the activities to be carried out.
- **RESPECT** the board indicating the maximum number of people who can be present in the various rooms.
- **BAN ON USE** of employees' toilets. If necessary, ask FORMULA IMOLA staff.
- **KEEP interpersonal DISTANCES** of at least 1 meter.
- **WEAR THE MASK** , if it is not possible in the performance of the activity, maintain the safety distance of at least 1 meter.

Name surname .....

Signature .....