

PARTICIPANT COMMITMENT FORM

Name of the Organization: Aladağlar Sky Trail

Location: Dermirkazık Aladağlar

Date: August 10, 2024

1. I hereby declare that, during the 14 days leading up to the organization dates, I have not exhibited any symptoms associated with COVID-19 (CORONAVIRUS) as outlined by the WHO and the Turkish Ministry of Health, including fever, runny nose, nasal congestion, sneezing, coughing, sore throat, muscle/joint pain, loss of smell, or any other signs of contagious diseases.
2. I have not been in contact with any individuals diagnosed with or showing symptoms of COVID-19 (CORONAVIRUS) in the last 14 days leading up to the event date. I confirm that I have complied with all preventative measures and have exercised utmost care regarding these matters.
3. I will adhere to all the rules regarding social distancing and precautions during the event, within the competition area, and throughout the course, as recommended for the specified period.
4. Should I exhibit any symptoms of COVID-19 (CORONAVIRUS) and/or any contagious disease before, during, or after the event, I will immediately inform the event authorities and health teams. I will allow my temperature to be taken at fever measurement checkpoints and will not resist being directed to a healthcare facility by the event team if there is any suspicion of my illness at any time during the event.
5. If I detect the presence of any individual exhibiting symptoms of COVID-19 (CORONAVIRUS) and/or any contagious disease, I will immediately notify the event authorities and health teams.
6. I am fully aware of my responsibilities regarding the pandemic and will exercise maximum care and diligence in detecting, preventing, and/or mitigating the spread of the disease towards the organization team and third parties.
7. I will comply with all measures and rules set by the Turkish Athletics Federation related to the event, as well as the measures and rules determined by the Turkish Ministry of Health and the Ministry of Youth and Sports, among other relevant authorities.
8. I will not leave the designated areas (race course, event area, etc.) determined by the event management within the event venue and will follow all directions given by the officials, acknowledging that all responsibility in this matter lies with me.
9. In the 14 days following the event, should I exhibit symptoms of COVID-19 (CORONAVIRUS) or test positive for COVID-19 (CORONAVIRUS), I will notify the event authorities and the relevant department of the Turkish Ministry of Health and will participate in any subsequent contact tracing or similar activities.
10. I acknowledge that if I carry COVID-19 (CORONAVIRUS) unknowingly during the event and thereby infect other participants or third parties or cause them harm, the legal and criminal responsibility lies solely with me.
11. I will avoid any actions and behaviors that may pose a risk to the event area, team, other participants, and third parties. I will comply with disinfection routines, social distancing, hygiene, and all other preventive, and protective rules. I understand my responsibility not only in terms of adhering to these precautions but also in ensuring their enforcement. I acknowledge my obligation to review all rules and commitments, confirming that I have reviewed, read, and understood them all accurately.

I hereby accept, declare, and commit on the date ..././2024.

PARTICIPANT NAME AND SURNAME

SIGNATURE

PASSPORT NUMBER:

MOBILE PHONE NO:

ADDRESS: