Dohov Marine Sports Club نادي الدوحة للرياضات البحرية



## \_ AQUABIKE

**Medical Examination** 

## **Medical Certificate**

I, Doctor	Specialist in:	
Hereby declare that Mr		
Born in		on
Nationality	Passport number:	
Has carried ou	ut the medical examination	
The results of the tests are normal and I therefore declare the driver eligible for racing.		
This certificate is valid for one year from today's date		
	·	Stamp
Doctors Signa	ture	

Medical Certificate

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