

SELF-DECLARATION FORM

TMC Ultra 50K and TMC HalfUltra 25K 23.08.2025

Your safety is our priority. Please fill out this form truthfully before the race.

Personal details
Name:
• Bib number:
Mobile (carried during race):
Emergency contact (name and phone number):
Race (check one): □ Ultra 50K – I participate at my own risk and I am trained to complete 50 km in the terrain. □ HalfUltra 25K – I participate at my own risk and I am trained to complete 25 km in the terrain.
Confirmations: ☐ I have knowledge of map and compass use / GPS navigation. ☐ I have read and accepted the mandatory gear list (50K Ultra only). ☐ I have read and accepted the race regulations.
Medical information (optional, but important for your safety):Allergies:
Medical equipment (e.g. asthma inhaler, insulin pump, EpiPen):
Other information the organizer should know:
I consent to the organizer contacting my emergency contact or medical personnel necessary.
Date:
Signature: