



ÖTILLÖ PRE RACE MEDICAL QUESTIONNAIRE

PREVIOUS MEDICAL HISTORY;

HEART DISEASE; (Ex Arythmias, Myocarditis)

PULMONARY DISEASE; (EX Asthma)

DIABETES

EPILEPSIA

OTHER SEVERE DISEASE

ONGOING MEDICATION;

ALLERGIES

#Race

Name

Date

Team name and number

#Signature