

!!! Download the Attestation on the internal storage of your device and use Acrobat Reader DC !!!
The Attestation must be submitted 15 days prior to the intended UCI sanctioned event

[To be sent via Online Form \(click here\)](#)

Rider - First Name, Last Name:

Rider - UCI ID:

Rider - Date of birth:

I, as _____ of the athlete _____, hereby certify that the
rider was measured in accordance with the state of the art, on _____, in a height of _____ cm.

Contact information (To be filled by the Head Medical Director / the Family Doctor):

First Name, Last Name:

Team (if Head Medical Director):

Professional phone number (with the area code):

Professional address:

Signature of the Head Medical Director / Family doctor:

Notice on personal data: Information contained in and shared with the UCI through this certificate are considered as personal data under relevant laws and/or regulations. In this respect, the UCI and its relevant departments (More specifically, the medical director and the Sports Department) ensure that personal data involved (whether sensitive or not) will be processed lawfully, fairly and in a transparent manner in relation to the data subjects and only for the legitimate purpose provided for in the article 1.3.023 of the UCI Cycling Regulations. Personal data will be processed by authorised staff members in a manner that ensures their appropriate security. Data subjects may ask any questions and/or exercise their related rights at any time by contacting: dataprotection@uci.ch. However, the exercise of such rights may impede the granting of the exemption to the athlete.