**Alla c.a. della Dirigente Scolastica**

**del Liceo Galileo Galilei Verona**

**PROGETTO DIDATTICO SPERIMENTALE STUDENTE-ATLETA DI ALTO LIVELLO**

**DICHIARAZIONE DELL’ ATTIVITÀ AGONISTICA**

Il sottoscritto (Cognome e Nome dello Studente)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

frequentante la classe \_\_\_\_\_\_\_\_\_\_\_\_\_

nell’a.s. 2024/2025

DICHIARA

(Elencazione degli impegni dell’atleta: allenamenti, campionati, partite, tornei, raduni, manifestazioni con date programmate o comunque previste nell’anno)

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Luogo e data, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firma dello Studente maggiorenne\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firma del Genitore o esercente potestà genitoriale \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_