**POTRDILO O SAMOTESTIRANJU**

**S tem potrdilom spodaj podpisani zakoniti zastopnik**

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**mladoletne osebe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , rojene \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,**

**ki trenira in tekmuje v okviru HK SŽ Olimpija potrjujem, da otrok opravlja samotestiranje za prisotnost Sars-Cov-2 virusa v domačem okolju skladno z veljavnimi predpisi oz. odloki.**

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| **DATUM TESTIRANJA** | **pozitiven/a** | **negativen/a** | **PODPIS STARŠA/SKRBNIKA** |
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