

COVID-19 RETURN TO PLAY PARTICIPANT AGREEMENT



As a participant, and/or a parent or legal guardian of a participant, as the case may be, in the sport of swimming and the programs, activities and events of Kamloops Classic Swimming, I acknowledge and agree to the following terms when entering club facilities and/or participating in club activities under the COVID-19 Response Plan and Return To Play Protocol:

- I agree to symptom screening checks and will let my club know if I have experienced any of the following symptoms in the last 14 days. As per the BC Centre for Disease Control, the symptoms of COVID-19 are similar to other respiratory illnesses including the flu and common cold. They include:
 - Fever
 - Chills
 - Cough
 - Shortness of breath
 - Sore throat and painful swallowing
 - Stuffy or runny nose
 - Loss of sense of smell
 - Headache
 - Muscle aches
 - Fatigue
 - Loss of appetite
- I agree to stay home if feeling sick and remain home for 14 days if experiencing COVID-19 symptoms.
- I agree to sanitize my hands upon entering and exiting the facility, with soap or sanitizer.
- I agree to sanitize the equipment I use throughout my practice with approved cleaning products provided by the club (shared and personal equipment).
- I agree to continue to follow social distancing protocols of staying at least 2m away from others.
- I agree to not share any equipment during practice times.
- I agree to abide by all my Clubs COVID-19 Policies and Guidelines.
- I understand that if I do not abide by the aforementioned policies/guidelines, that I may be asked to leave the club for up to 14 days to help protect myself and others around me.
- I acknowledge that continued abuse of the policies and/or guidelines may result in suspension of my club membership temporarily.
- I acknowledge that there are risks associated with entering club facilities and/or participating in club activities, and that the measures taken by the club and participants, including those set out above and under the COVID-19 Response Plan and Return to Sport Protocols, will not entirely eliminate those risks.

Acknowledgement

I declare that I am 19 years of age or older and I acknowledge that I have read this Participants Agreement and that I have accepted this Agreement voluntarily. If I am a participant under 19 years of age, I acknowledge that I must have my parent or legal guardian who is 19 years of age or older read, accept and sign this Agreement voluntarily on my behalf.

Name of swimmer (printed): _____ Date: _____

Signature of swimmer (if over 19): _____

Name of Parent/Guardian (if swimmer under 19): _____

Signature of Parent/Guardia (if under 19): _____