



DECLARATION OF COMPLIANCE – COVID-19

Individual Name (print): _____

Individual's Parent/Guardian _____
(if the individual is younger than 18 years old)

Email: _____

Telephone: _____

WARNING! ALL INDIVIDUALS ENTERING THE FACILITY AND/OR PARTICIPATING IN SANCTIONED ACTIVITIES MUST COMPLY WITH THIS DECLARATION

Curling Canada

Nova Scotia Stick Curling Competitive League

(collectively the "Organization") require the disclosure of exposure or illness is in order to safeguard the health and safety of all participants and limit the further outbreak of COVID-19. This Declaration of Compliance will be kept safely, and personal information will not be disclosed unless as required by law or with your consent.

An individual (or the individual's parent/guardian, if the individual is younger than the age of majority) who is unable to agree to the terms outlined in this document is not permitted to enter the Organization's facilities or participate in the Organization's activities, programs, or services.

I, the undersigned being the individual named above and the individual's parent/guardian (if the individual is younger than the age of majority), hereby acknowledge and agree to the terms outlined in this document:

- 1) The novel coronavirus, COVID-19, is extremely contagious, can cause serious illness and even death. The Organization has put in place preventative measures to reduce the spread of COVID-19 and requires all individuals (or their parent/guardian, when applicable) to adhere to the compliance standards described in this document.
- 2) The individual has not been diagnosed with COVID-19; **OR** if the individual was diagnosed with COVID-19, the individual has recorded two negative covid tests at least 24 hours apart.
- 3) The individual has not been exposed to a person with a confirmed or suspected case of COVID-19; **OR** if the individual was exposed to a person with a confirmed case of COVID-19, the individual has recorded two negative covid tests at least 24 hours apart.



- 4) The individual is attending or participating voluntarily and understands the risks associated with COVID-19. The individual (or the individual's parent/guardian, on behalf of the individual (when applicable)) agrees to assume those risks, including but not limited to exposure and being infected.
- 5) The individual has not, nor has anyone in the individual's household, experienced any signs or symptoms of COVID-19 in the last 2 days (including fever, new or worsening cough, fatigue, chills and body aches, respiratory illness, difficulty breathing, nausea, vomiting or diarrhea, pink eye, or loss of taste or smell).
- 6) If the individual experiences, or if anyone in the individual's household experiences, any signs or symptoms of COVID-19 after submitting this Declaration of Compliance, the individual will notify the Organization, and not attend any of the Organization's facilities, activities, programs or services unless the individual has recorded two negative covid tests at least 24 hours apart since those symptoms were last experienced.
- 7) The individual is following recommended guidelines, including but not limited to, practicing physical distancing, trying to maintain separation of six feet from others, adhering to recognized hygiene best practices, and otherwise limiting exposure to COVID-19.
- 8) The individual will follow the safety, physical distancing, and hygiene protocols of the Organization.
- 9) This document will remain in effect until the Organization determines that the acknowledgements in this Declaration of Compliance are no longer required.
- 10) The Organization may remove the individual from the facility or from participation in the activities, programs or services of the Organization at any time and for any reason if the Organization believes, in its sole discretion, that the individual is no longer in compliance with any of the standards described in this document.

Signature: _____
Individual (If the age of majority)

Date: _____

Signature: _____
Parent/Guardian (if the individual is younger than age of majority)

Date: _____