

# CAMPBELL RIVER CURLING CLUB 2020-21 PARTICIPANT AGREEMENT<sup>1</sup>

Application - all athletes, coaches, members, volunteers, participants and family members of participants while in attendance at club activities ("Participants")

All Participants of the **Campbell River Curling Club** agree to abide by the following points when entering club facilities and/or participating in club activities under the COVID-19 Response plan and RTP Protocol:

- I agree to symptom screening checks, and will let my club know if I have experienced any of the symptoms in the last 14 days.
- 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 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 physical distancing protocols of staying at least 2m away from others.
- I agree to not share any equipment during game/practice times.
- I agree to abide by all of my Club's 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.

Date:

Print Your First and Last Name:

Signature:

Witness Name and Signature:

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## For Participants Under the Age of Majority – PARENTS/GUARDIANS MUST READ AND SIGN

Participants Name:

Participants Date of Birth (yyyy/mm/dd):

I am the Parent/Guardian of the Participant and have full legal responsibility for the decisions of the Participant.

Name of Parent/Guardian:

Signature of Parent/Guardian:

Date:

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<sup>1</sup> viaSport Return To Sport Guidelines: <https://www.viasport.ca/sites/default/files/ReturntoSportGuidelines.pdf>