



## **NOVEL CORONAVIRUS (COVID-19) ACKNOWLEDGEMENT AND ASSUMPTION OF RISK Waiver Form**

I am currently not experiencing COVID19 symptoms nor have I had COVID-19 symptoms in the last 14 days.

I have not travelled outside of Canada or in an area under a travel health advisory in the last 14 days.

I have not provided care or had close contact with any person with COVID-19 or with any person reasonably suspected of having COVID-19 or with any person who travelled outside of Canada in the last 14 days or with any person who travelled in an area under a travel health advisory in the last 14 days.

I represent and warrant to the Release that I have not been advised by the Government of Canada or Ontario Public Health or my doctor or the Ontario Ministry of Health website to self-isolate due to possible exposure to COVID-19.

I am fully aware of the risks and hazards with respect to COVID-19 inherent in my attendance at the Premises and participation in the activities of training with **ACCOUNTABILITY ONE PLAYER SHARPENS ANOTHER CAMPS.**

I freely and voluntarily agree to assume the risk with respect to COVID-19, including the risk of death, bodily injury or property damage, regardless of severity, that I (or my child/ward) may sustain as a result of my participation in the activities of **ACCOUNTABILITY ONE PLAYER SHARPENS ANOTHER CAMPS.** or attendance at the Premises, howsoever arising, including, but not limited to, the active or passive negligence of the Releasees.

I will follow all preventative measures and guidelines given by the Province of Ontario's Medical Advisors in regards to COVID-19 while participating with **ACCOUNTABILITY ONE PLAYER SHARPENS ANOTHER CAMPS.**

Athlete Signature or Parent If Athlete is not an Adult: \_\_\_\_\_

Date: \_\_\_\_\_