

COVID-19 Attestation and Agreement

NAME: _____ (“Participant”) NAME OF CLUB: _____

In consideration of being permitted to participate in the sport of swimming and the programs, activities and events of the club named above (the “club”) and, as the case may be, *Canadian Independent Masters Swimming (CIMS)*, *Masters Swimming Manitoba (MSM)* or *Masters Swimming Ontario (MSO)* (the “Organization”), the undersigned:

1. Attests and agrees to participate in activities **and future activities** ONLY if the participant:
 - a. Has not been diagnosed with COVID-19 or, if diagnosed previously, attests that the participant has been cleared as noncontagious by provincial or local public health authorities and has provided, in conjunction with this form, written confirmation from a medical doctor of the same;
 - b. Does not have any of the following symptoms: cough, shortness of breath, chest pain, difficulty breathing, fever, chills, repeated shaking with chills, abnormal muscle pain, headache, sore throat, painful swallowing, runny nose, new loss of taste or smell, and/or gastrointestinal illness;
 - c. Has not been in contact with or cared for someone with COVID-19 in the last 14 days; and
 - d. Has not returned from a trip outside the country within the last 14 days.
2. Agrees that the participant:
 - a. Will immediately advise if the statements made on this form are no longer accurate as a result of a COVID-19 diagnosis, onset of symptoms, contact being made with someone with COVID-19 or travel outside of the country;
 - b. Has reviewed and will follow the return to swimming procedures issued by their club (named above); and
 - c. Will follow the laws, recommended guidelines, and protocols issued by their Province in respect of COVID-19, including practicing physical distancing, and will do so to the best of the participant’s ability while participating in the activity.
3. Agrees and accepts the risks that:
 - a. By participating in the activity, the participant assumes the risk of contracting COVID-19 and/or transmitting it to others and voluntarily accepts that risk.

I hereby acknowledge that I have read this *Attestation and Agreement*, that I voluntarily attest and agree to all statements.

Name of Participant (Please Print)

Signature of Participant

Date