



## COMOX VALLEY SCHOOLS PARTICIPANT AGREEMENT

Application - all athletes, coaches, officials, volunteers, and spectators while in attendance at any and all school sport activities (“Participants”), including practices and team meetings.

All Participants of COMOX VALLEY SCHOOLS sports agree to abide by the following points when entering school sport facilities and/or participating in activities under the COVID-19 Response plan and Return To Play Protocol:

- I agree to symptom screening checks and will let my school and team coach 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 I use throughout my practice with approved cleaning products provided (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 of COMOX VALLEY SCHOOLS COVID-19 policies, procedures, and guidelines.
- I understand that if I do not abide by the aforementioned policies/procedures/guidelines, that I may be asked to not to participate and attend any practices or games for up to 14 days to help protect myself and others around me.
- I acknowledge that continued abuse of the policies, procedures and/or guidelines may result in suspension of my involvement temporarily.
- I acknowledge that there are risks associated with entering the facilities and/or participating in school sport activities, and that the measures taken by COMOX VALLEY SCHOOLS and it’s participants, including those set out above and under the COVID-19 Response Plan and Return to Sport Protocols, will not entirely eliminate those risks.

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Name of Participant (Print)

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Signature of Participant

\_\_\_\_\_  
Name of Parent/Guardian (Print)  
(If participant is Under 19)

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Signature of Parent/Guardian

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Date Signed