



Edgemont Community Centre (ECC)

COVID-19 Participant Declarations and Undertakings

Note: Failure to complete and submit this declaration prior to visiting or upon arrival at Edgemont Community Centre will result in denial of access to the Facility and any programs.

The COVID -19 virus has a long period where a person can be infectious prior to exhibiting symptoms. Additionally, the virus can be transmitted by asymptomatic people. The ECA is adhering to Provincial Health rules and regulations but there can be no assurance that the virus will not be contracted at the Community Centre.

Please understand that you are entering the facility and/or taking part in any programming or activities at your own risk.

The Edgemont Community Association (ECA) operates the Edgemont Community Centre and the ECA appreciates and expects your cooperation to allow us to re-open the Community Centre as safely as possible. The ECA must insist on strict observance of ECC COVID - 19 Protocols to protect the health of our community. The Edgemont Community Association permits the use of the ECC based on the assurances you give within this document. False statements could result in legal liability for you. By submitting this declaration, you agree to observe and fully abide by all rules and regulations prescribed by the Edgemont Community Association. You may be required to leave the premises if you are found to be not following the rules and regulations. If required to leave, you will do so immediately.

For efficiency, this waiver may be submitted in advance provided that, on the day of the event - including each time you attend a program with multiple dates, the declaration below is true and correct. If, on the day of any event or program, you no longer meet the criteria of this, your declaration, you must not enter the facility.

Declaration:

I hereby declare that neither I nor anyone in my household or cohort is now, nor have they ever been, infected with the COVID-19 virus; OR I or they have made a full recovery and have subsequently tested negative for COVID-19.

I hereby declare that neither I nor anyone in my household or cohort has experienced any cold or flu-like symptoms in the last 14 days (including but not limited to fever, cough, sore throat, respiratory illness, difficulty breathing).

I hereby declare that if anyone in my household or cohort experiences any cold or flu-like symptoms after my submission of this declaration, I will not visit the Edgemont Community Centre for a minimum period of 14 days after the cold or flu-like symptoms have completely disappeared.

I hereby declare that neither I nor any member of my household or cohort have travelled to or had a lay-over in any country outside Canada in the past 14 days. I agree that, should I or anyone in my household or cohort travel to any country outside Canada after submitting this declaration, then I will not visit the Edgemont Community Centre for a minimum period of 14 days after the date of return to Canada.

I have read and understand the Edgemont Community Association COVID-19 rules and accept and waive rights to any privileges should I not comply with these rules.

I hereby accept the RISK OF CONTRACTING COVID-19 by choosing to attend or use the Edgemont Community Centre.

I hereby release and hold harmless the Edgemont Community Association, its Directors, Officers and Staff from any and all claims that I have, or may have in the future, for any loss or damage that I may suffer due to contracting COVID-19, including sickness or death, which occurs as a result of attending at the Edgemont Community Centre. I agree to abide by any requests to immediately leave the premises when so directed by the Edgemont Community Association.

This declaration and undertaking will remain in full force and effect until such time as the COVID-19 pandemic is declared to have ceased according to competent authority.

By completing and submitting this declaration I attest that the statements within are true and that I will abide by the terms of this declaration:

Required*

First Name * _____

Last Name * _____

Signature * _____

Signature of Parent or Guardian (If signing for applicant) _____

Date * MM []/DD[]/2020