



Mariners Volleyball Club Waiver Form

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

All Participants 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:

1. I agree to symptom screening checks and will let my club know if I have experienced any COVID-19 symptoms in the last 14 days.
2. I agree to stay home if feeling sick and remain home for 14 days from initial development of COVID-19 symptoms or until deemed non-contagious by public health.
3. I agree to sanitize my hands upon entering and exiting the facility, with soap or sanitizer.
4. I agree to wear a mask when entering and exiting the facility (unless they are exempt based on Ministerial Order No. M425). Athletes are not required to wear it when on the field of play.
5. I agree to sanitize the equipment (shared and personal equipment) I use throughout my practice with approved cleaning products provided by the club.
6. I agree to continue to follow social distancing protocols of staying at least 2m away from others when not on the field of play.
7. I agree to not share any unnecessary equipment during practice times.
8. I agree to abide by all of my Clubs COVID-19 Policies and Guidelines.
9. I understand that if I do not abide by the aforementioned policies/guidelines, I may be asked to leave the club for up to 14 days to help protect myself and others around me.
10. I acknowledge that continued abuse of the policies and/or guidelines may result in suspension of my club membership.
11. I acknowledge that there are risks associated with entering club facilities and/or participating in club activities. 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.

Participant Name: _____
(Please Print)

Signature: _____ Date: _____
Participant

Signature: _____ Date: _____
(Parent/Guardian if under the age of majority – 19 years old)