

# ACKNOWLEDGEMENT AND ASSUMPTION OF RISKS FORM

**(FOR ADULT PARTICIPANT AND MINOR PARTICIPANT)**

*Please read this document carefully.*

The novel coronavirus, COVID-19 has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is known to spread mainly by contact from person to person. Consequently, local, provincial, and federal governmental authorities recommend various measures and prohibit a variety of behaviors, in order to reduce the spread of the virus.

Water-Polo Canada (hereinafter "WPC"), its Provincial and Territorial Sections (hereinafter "PTS") and WPC or PTS's affiliated clubs or leagues (hereinafter "Clubs" or "Leagues") commit themselves to comply with the requirements and recommendations related to COVID-19 of any applicable local or municipal, provincial and federal Public health authorities and the facilities where they conduct their activities or programs, and to put in place and adopt all necessary measures to that effect.

However, Water-Polo Canada, its Provincial and Territorial Sections, Clubs and Leagues cannot guarantee that you (or your child, if registrant is a minor/ or the person you are the tutor or legal guardian of) will not become infected with COVID-19. Further, attending or participating in WPC, Provincial and Territorial Sections, Clubs or Leagues' activities or programs could increase your risk of contracting COVID-19, despite all preventative measures put in place.

By signing this document,

- I acknowledge the highly contagious nature of COVID-19 and I voluntarily assume the risk that I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) could be exposed or infected by COVID-19 by participating in the Water- Polo Canada, PTS, Clubs or Leagues' activities or programs. Being exposed or infected by COVID-19 may particularly lead to injuries, diseases, or other illnesses.
- I declare that I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) am participating voluntarily in the Water-Polo Canada, PTS, Clubs or Leagues' activities and programs.
- I declare that neither I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) nor anyone in my household, have experienced cold or flu-like symptoms in the last 14 days of my participation in the activities (including fever, cough, sore throat, respiratory illness, difficulty breathing).
- If I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) experience, or if anyone in my household experiences any cold or flu-like symptoms after submitting this declaration, I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) will not attend or participate in any of Water-Polo Canada, PTS, Clubs or Leagues' activities or

programs until at least 14 days have passed since those symptoms were last experienced.

- I have not (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of), nor has any member of my household, travelled to or had a lay-over in any country outside Canada, or in outside of my Province or residence, in the past 14 days from the day of my participation.
- If I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) travel, or if anyone in my household travels, outside my Province of residence after submitting this declaration, I (or my child, if registrant is a minor/ or the person I am the tutor or legal guardian of) will not attend or participate in any of Water-Polo Canada, PTS, Clubs or Leagues' activities, programs or services until at least 14 days have passed since the date of return.
- Given that the COVID-19 symptoms might appear after this document is signed, I (or my child, if registrant is a minor/or the person I am the tutor or legal guardian of) accept and consent that WPC, its PTS or Clubs and Leagues might, at their discretion require that this document be signed more than once.
- This document will remain in effect for the Water-Polo Canada, PTS, Clubs or Leagues' activities, programs and services, until the applicable provincial and federal governments' health officials determine that the acknowledgments in this declaration are no longer required.
- I have signed this document freely and with full knowledge.

**For a Minor participant or registrant**

Name of the Minor: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name of parent or legal guardian (Print): \_\_\_\_\_

Signature of parent or legal guardian: \_\_\_\_\_

Signed in (City): \_\_\_\_\_ Date: \_\_\_\_\_

**For an Adult participant or registrant**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signed in (City): \_\_\_\_\_ Date: \_\_\_\_\_