

COVID-19 Questionnaire and Attestation

I attest that I am not experiencing any symptoms of illness such as a fever, cough, difficulty breathing, shortness of breath or malaise (severe fatigue or feeling of being generally unwell).

If I develop these symptoms, I agree that I will leave the premises immediately and immediately inform Ranbir Kahlon or Davinder Sekhon or Aman Mangat.

I am aware that I must follow the safety and hygiene protocols of British Columbia, the BC Public Health Agency, Field Hockey BC, and Elite Field Hockey Club.

I attest that:

- I have not travelled internationally in the past fourteen (14) days.
- I have not travelled outside the Province of British Columbia in the last fourteen (14) days.
- I have not travelled to an area highly impacted by COVID-19 within my Province in the past fourteen (14) days.
- I have not and do not believe that I have been exposed to a person with a confirmed or suspected case of COVID-19.

I attest that:

- I have not been diagnosed with COVID-19
- OR
- I have been diagnosed with COVID-19 and been cleared as noncontagious by provincial or local public health authorities (confirmation from a medical practitioner will be required and maintained in a confidential file by the organization)

I acknowledge and agree that I will follow recommended guidelines, laws and protocols of British Columbia, the BC Public Health Agency, Field Hockey BC, and Elite Field Hockey Club in order to reduce the spread of COVID-19.

I acknowledge that the foregoing statements are true.

Date of Activity Session: _____

Adult Participant (19+):

Date of Birth: _____

Participant's Signature: _____ Date: _____

Organization: _____

PARENTAL ATTESTATION (if participant is under the age of 19)

Name of Participant: _____

Printed Name of Parent/Guardian:

Parent/Guardian Signature

_____ Date: _____