



OAS DECLARATION OF COMPLIANCE: COVID 19 2021-22

Participant's Name (print): _____

Participant's Parent/Guardian: _____
(if under the age of 18)

Email: _____

Telephone: _____

Disclosure of exposure or illness is required in order to safeguard the health and safety of all people and restrict the further outbreak of COVID-19. This information will be kept safely, and any personal information will not be disclosed unless required by law, or with your consent.

I, the undersigned being the Participant and the Participant's Parent/ Guardian (if the Participant is under the age of majority), hereby acknowledge and agree to the terms outlined in this document:

- 1) The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and COVID-19 is extremely contagious. Ontario Artistic Swimming and its Affiliated Organizations (collectively the "Organization") have put in place preventative measures to reduce the spread of COVID-19; however, the Organization cannot guarantee that the Participant will not become exposed or infected with COVID-19.
- 2) The Participant is participating voluntarily and understands the risks associated with COVID-19 and agrees to assume those risks, including but not limited to exposure and being infected.

I/We have read and agree to be bound by paragraphs 1 & 2

- 3) The Participant has not been diagnosed with COVID-19 or has been cleared as noncontagious by provincial or local public health authorities. If so, date cleared: _____

- 4) The Participant has not, nor has anyone in the Participant's household, experienced any signs or symptoms of COVID-19 in the last 14 days that would require them legally to self-isolate, including (and where unrelated to pre-existing conditions such as allergies or asthma) fever, cough, shortness of breath, sore throat, painful swallowing, fatigue, chills, runny nose or nasal congestion, nausea, vomiting, diarrhea, unexplained loss of appetite, loss of smell or taste, muscle or joint aches, headache, or conjunctivitis (commonly known as pink eye), or other symptoms identified by public health experts.



5) If the Participant experiences, or if anyone in the Participant's household experiences, any signs or symptoms of COVID-19 after submitting this declaration, the Participant will immediately self-isolate, notify the Organization, and not attend any of the Organization's activities, programs, or services until they have been medically cleared by their local public health unit. The Organization will submit an incident report through the Ontario Artistic Swimming Injury Tracker for all cases of confirmed COVID-19.

I/We have read and agree to be bound by paragraphs 3-5

6) The Participant has not, nor has any member of the Participant's household, travelled to, or had a lay-over in, any country outside Canada in the past 14 days.

7) If the Participant travels, or if anyone in the Participant's household travels, outside of Canada after submitting this declaration, the Participant will not attend any of the Organization's activities, programs, or services until at least 14 days have passed since the date of return.

8) If the Participant is exempt, or if anyone in the Participant's household is exempt from border restrictions on the basis that their reason for travel is on the Chief Public Health Officer's list of essential services and functions, as _____ (specify) and the exempt person that travelled to or had a lay-over in any country outside Canada in the past 14 days does not have signs or symptoms of COVID-19, the Participant may attend the Organization's activities, programs, or services.

9) If the Participant is fully vaccinated against COVID-19 and exempt from Government of Canada quarantine requirements and does not have signs or symptoms of COVID-19, the Participant may attend the Organization's activities, programs, or services.

I/We have read and agree to be bound by paragraphs 6-9

10) The Participant is following recommended guidelines, including but not limited to, practicing physical distancing, adhering to recognized hygiene best practices, and otherwise limiting the Participant's exposure to COVID-19.

11) The Participant will follow the safety, physical distancing, and general hygiene protocols of the Organization.

12) The Participant understands that a representative of the Organization will submit an incident report through the Ontario Artistic Swimming Injury Tracker if COVID-19 is confirmed.

13) This document will remain in effect until the Organization, per the direction of the provincial government and provincial health officials, determines that the acknowledgements in this declaration are no longer required.



14) The Organization may remove the Participant from the facility or from participation in the activities, programs, or services of the Organization at any time and for any reason if the Organization believes, in its sole discretion, that the Participant is no longer in compliance with any of the standards described in this document.

I/We have read and agree to be bound by paragraphs 10-14

Signature: _____ Date: _____
Participant (if 13 and over)

Signature: _____ Date: _____
Parent/ Guardian (if under the age of 18)