



Health Screening Declaration regarding COVID-19 LTED 2020

The safety of our participants, coaches, venue staff, and all support persons remains our overriding priority. In accordance with EC and PTSO recommendations, we have reduced the number of people permitted at each LTED activity to help observe recommended social distancing. We note however that you, the LTED Rider and parent, are responsible for maintaining those distances.

Everyone attending the LTED event is required to check in and to sign the following Declaration regarding their health immediately upon arrival.

Everyone is expected to observe sensible social distancing and handwashing practices.

Self-Declaration

1	I understand the risks of coming into contact with other people during the COVID-19 global pandemic at the facility. I understand that I could become infected with COVID-19 while at the facility. I agree to waive all liability and to indemnify the facility and organizers for damages that may be incurred by the facility as a result of any mis-statement in this self declaration.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	To your knowledge have you or anyone in your household had contact of any kind with someone diagnosed with COVID-19 (presumptively or confirmed) within the last 15 days?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Have you or anyone in your household experienced any cold or flu-like symptoms in the last 15 days, including, but not limited to fever, cough, sore throat, respiratory illness, shortness of breath or difficulty breathing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Have you or anyone in your household returned from any destination outside of Canada or travelled in an airplane from any destination within the last 15 days?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	I understand that should circumstances arise I have a duty to the facility to refrain from participation in LTED activities until a period of 15 days has passed. Upon re-entry I am required to complete a further self declaration.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Print Name: _____ Signature: _____ M ___ D ___, 2020

