



## DECLARATION OF COMPLIANCE - COVID 19

Participant's Name (print): \_\_\_\_\_

Participant's Parent/Guardian \_\_\_\_\_  
(if Participant is under the age of majority)

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Volleyball BC and its affiliated Clubs (collectively the "Organization") requires disclosure of exposure or illness in order to safeguard the health and safety of all participants and limit the further outbreak of COVID-19. This Declaration of Compliance will be kept safely, and personal information will not be disclosed unless as required by law or with your consent.

A Participant (or the Participant's parent/guardian, if the Participant is under the age of majority) who is unable to agree to the terms outlined in this document is not permitted to participate in the Organization's activities, program, or services at this time.

I, the undersigned being the Participant or 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 corona-virus COVID-19, has been declared a worldwide pandemic by the World Health Organization and COVID-19 is extremely contagious. The Organization has put in place preventative measures to reduce the spread of COVID-19 and requires all Participant's (or their Parent/Guardian, when applicable) to adhere to the compliance standards described in this document.
2. The Participant has not been diagnosed with COVID-19, OR if the Participant was diagnosed with COVID-19, the Participant was cleared as noncontagious by provincial or local public health authorities more than 14 days prior to the date of this declaration of compliance was signed.
3. The Participant has not been exposed to a person with a confirmed or suspected case of COVID-19; OR if the Participant will expose to a person with a confirmed or suspected case of COVID-19, the date of exposure was more than 14 days prior to the date of this declaration of compliance was signed.
4. The Participant has not, nor has anyone in the Participant's household, experiences cold or flu like symptoms in the last 14 days (including fever, cough, sore throat, shortness of breath, respiratory illness, difficulty breathing).
5. If the Participant, or if anyone in the Participant's household, experiences any cold or flu like symptoms after submitting the declaration of compliance, the Participant will not attend any of the Organization's activities, programs or services until at least 14 days have passed since those symptoms were last experienced.

6. The Participant has not, nor has any member of the Participant's household, traveled two or had a lay-over in any country outside Canada, or in any province outside of British Columbia, in the past 14 days. If the Participant's travels, or if anyone in the Participant's household travels, outside the province of British Columbia after submitting this declaration of compliance, 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.
7. The Participant is following recommended guidelines, including but not limited to, practicing physical distancing, trying to maintain separation of 6 feet from others, frequent hand washing, an otherwise limited exposure to COVID-19.
8. The Participant will follow the safety, physical distancing and hygiene protocols of the Organization as outline on the Organization's website.
9. This document will remain in effect until the Organization, per the direction of the provincial government and provincial health officials, determines that the acknowledgments in this Declaration of Compliance are no longer required.
10. The Organization may remove the Participant from participation in the activities, programs or services of the Organization at anytime and for any reason if the Organization believes, in its sole discretion, that the Participant is no longer in compliance with any of these terms described in this document.
11. The Participant consents to disclosing the information in this declaration of compliance and also consents to the Organization collecting their personal information for the purpose of risk management and contact tracing during the COVID- 19 pandemic.

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

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
(Parent/Guardian if under the age of majority)

Date: \_\_\_\_\_