

**PLEASE NOTE:** It is the parent's responsibility to NOT come to the gym if your child, yourself, anyone in your household, or anyone you have regular contact with begins experiencing any symptoms of illness.

Please answer the below questions before bringing your child to any and all practices:

Yes. No.	Have you been in close contact with a suspected or confirmed case of COVID-19 in the last 14 days?
Yes. No.	Have you had a fever or felt feverish in the last 72 hours?
Yes. No.	Are you experiencing any respiratory symptoms including a runny nose, sore throat, cough, or shortness of breath?
Yes. No.	Are you experiencing any new muscle aches or chills?
Yes. No.	Have you experienced any change in your sense of taste or smell?
	e returned to us <u>before</u> your first practice. Please save a copy and review these questions every time your child will enter the gym. If you answer yes to any question, please keep your
By sending your to all.	child to practice you are confirming you have reviewed the above questions and answered no
Signature:	
•	es may be used to sign this agreement and shall have the same force and effect as an original ic signatures are any letters, characters, or symbols, manifested by electronic or similar means,

executed or adopted by an authorized signatory, with an intent to authenticate an agreement. An agreement is

electronically signed if an electronic signature is logically associated with such agreement.