



Any person visiting this facility to participate in activities is required to enter/exit the facility by the designated door. Everyone is required to sign the following Declaration regarding their health prior to entering the facility (and leave this at the facility for future contact tracing), and to register their attendance at the facility

If anyone feels ill prior to attending the facility, they are required to go through Manitoba Province's self-screening tool at <https://sharedhealthmb.ca/covid19/screening-tool/>

Statement:

I am assured that the facility has reopened according to Provincial Health Guidelines and the safety of event attendees and staff members remains an overriding priority.

I understand that everyone is expected to observe sensible social distancing and handwashing practices, and wear a mask if required, and that any person not complying with the facility's COVID-19 mitigation protocols may be asked to leave

Self-Declaration

1	I understand the risks of coming into contact with other people during the COVID-19 global pandemic. I understand that I could become infected with COVID-19 while at this facility and agree to waive all liability and to indemnify this facility for damages that may be incurred by this 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 the province 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 this facility to refrain from entering the premise 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 _____

Date _____