Boston Fencing Club RYC 1 and 2 Participant Certification and Release of Liability

Each participant and/or parent, legal guardian, coach, or any other person entering the premises is required to sign this document prior to tournament participation or facility use. This shall certify that, I, as participant or parent/guardian/coach/etc. have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases.

Furthermore, I, and/or my child/ward understands and accepts these risks and responsibilities for myself and/or child/ward. I hereby certify the following:

- a) I have not traveled to any state outside of New England (NH, VT, ME, RI, CT, MA), New Jersey, and New York within the last 14 days, and
- b) I have not, to the best of my knowledge, had ANY close contact nor cared for someone who has been diagnosed with Covid-19 within the last 14 days, and
- c) I have not experienced ANY cold or flu symptoms within the last 14 days regardless of severity. These symptoms include but are not limited to: fever, chills with or without aches, shaking with chills, unusual fatigue, pain (unrelated to physical exertion), unexplained sores on soles of feet, headaches, loss of taste or smell, cough, sore throat, respiratory illness, shortness of breath or difficulty breathing, and
- d) I certify that if any of the conditions attested to in a) through c) above, changes during the term of this participation, I will immediately cease participating and bring such change(s) to the attention of the facility director or a member of the bout committee. I understand that I may not be allowed to resume participation for at least a period of 14 days or until providing documentary evidence of testing negative for Covid-19. In this instance I agree to cooperate fully with public health and other officials in developing contact tracing, and
- e) I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. I further agree to comply fully with applicable federal, state and local guidelines with regard to Covid-19. If however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official or management immediately, and
- f) I accept that participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and Covid-19. While rules and personal hygiene/discipline may reduce this risk, the risk of serious illness and/or death does exist; and
- g) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISK, both known and unknown, even if arising from the negligence of the releases or others and assume full responsibility for my participation and
- h) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin. I hereby release and hold harmless Boston Fencing Club, their officers, officials, agents and/or employees, other participants, sponsors, and owners of premises used to conduct the activity or event, with respect to any and all illness, disability, death or damage to person or property, whether arising from the negligence of releases or otherwise to the fullest extent permitted by law.

Fencer/Coach_	Date
Parent/Legal Guardian	Date