



## Self-Declaration for Returning to Training

Due to the ongoing outbreak of COVID-19 Greenacres Young Curlers are adhering to guidance from Scottish Government and Public Health Scotland in containing the virus and ensuring a safe environment for athletes and staff.

GYC accepts that it is not possible for any sport to eliminate the risk of the spread of the COVID-19 virus completely and will work with all stakeholders to minimise risk; this concept must be fully understood and accepted by all GYC members who wish to return to the ice and resume activities.

The purpose of this document is to ensure everyone has considered the relevant risks and the required protocols and behaviours required to return to the ice as safely as possible. Please answer the following questions and return it to your club as per their instructions. Please only complete this form once prior to returning to training.

**Athlete/Staff Name** \_\_\_\_\_

<b>Q1</b>	I have attended a club briefing and/or received a copy of the club COVID-19 return to training information (or watched the club information video), understand the information and agree to comply with it?	YES / NO
<b>Q2</b>	Do you acknowledge the risk of COVID-19 and that you are 'Returning to the ice' at your own risk?	YES / NO
<b>Q3</b>	Do you acknowledge that you play a vital role in minimising the spread of COVID-19, over and above the measures implemented by the club?	YES / NO
<b>Q4</b>	I will adhere to current physical distancing guidelines (and ongoing as they are amended) on my travel to and from the training venue and whilst at the venue	YES / NO
<b>Q5</b>	Do you agree to adhere to all COVID-19 notices at the rink, agree to adhere to all Scottish Curling, GYC and the ice rink facility's COVID-19 measures both on and off the ice and agree to abide by any directions given by club officers while on premises specific to COVID-19 health and safety measures?	YES / NO

<b>Q6</b>	If, at any time, I have or suspect I have any symptoms of COVID-19 or believe I have been in contact with an individual with COVID-19 in the last 14 days, I will cease to attend training; will isolate immediately; and will contact the club COVID-19 Lead officer (Alison Torrance) and follow the appropriate medical advice?	YES / NO
<b>Q7</b>	Do you agree to complete the COVID-19 Health Screen Survey before attending your first training session and thereafter if you have a change to your general health or circumstances?	YES / NO

**Athlete/ Staff Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ +

**Parent/Carer Signature (if U16):** \_\_\_\_\_