



APPENDIX A – ILLNESS POLICY

In this policy, “Team member” includes an employee, volunteer, participant or parent/spectator.

1) Inform an individual in a position of authority (coach, team manager, program coordinator) immediately if, you feel any symptoms of COVID-19 such as fever, chills, cough, shortness of breath, sore throat and painful swallowing, stuffy or runny nose, loss of sense of smell, headache, muscle aches, fatigue and loss of appetite.

2) Assessment

- a. Team members must review the self-assessment communication sent to them prior to their shift/practice/activity to attest that they are not feeling any of the COVID 19 symptoms.
- b. Managers/coaches will visually monitor team members to assess any early warning signs as to the status of their health and to touch base on how they are regarding their personal safety throughout the workday/practice/activity.
- c. If Team Members are unsure please have them use the self-assessment tool <https://bc.thrive.health/covid19/en> or through the COVID-19 BC Support App self assessment tool.

3) If a Team Member is feeling sick with COVID-19 symptoms

- a. They should remain at home and contact Health Link BC at 8-1-1.
- b. If they feel sick and /or are showing symptoms while at work, they should be sent home immediately and have them contact 8-1-1 or a doctor for further guidance.
- c. No Team Member may participate in a practice/activity if they are symptomatic.

4) If a Team Member tests positive for COVID-19

- a. The Team Member will not be permitted to return to the workplace/practice/facility until they are free of the COVID-19 virus as per a doctor’s note.
- b. Any Team Members who work/play closely with the infected Team Member will also be removed from the workplace/practice/facility for at least 14 days to ensure the infection does not spread further.
- c. Close off, clean and disinfect their work/practice/facility area immediately and any surfaces that could have potentially be infected/touched.

5) If a Team Member has been tested and is waiting for the results of a COVID-19 Test

- a. As with the confirmed case, the Team Member must be removed from the workplace/practice/facility.
- b. The Public Health Agency of Canada advises that any person who has even mild symptoms to stay home and contact their local health authority.
- c. Other Team Members who may have been exposed will be informed and removed from the workplace/practice/activity for at least 14 days or until the diagnosis of COVID-19 is ruled out by health authorities.
- d. The workspace/practice/activity space will be closed off, cleaned, and disinfected immediately and any other surfaces that could have potentially been infected/touched.

6) If a Team Member has come in to contact with someone who is confirmed to have COVID-19

- a. Team Members must advise Wesburn FC Club Officials/coach if they reasonably believe they have been exposed to COVID-19.
- b. Once the contact is confirmed, the Team Member will be removed from the workplace/practice/activity for at least 14 days or as otherwise directed by public health authorities. Team Members who may have come into close contact with the Team Member will also be removed from the workplace for at least 14 days. The workspace/activity area will be closed off, cleaned, and disinfected immediately and any other surfaces that could have potentially been infected/touched.

7) Quarantine or Self-Isolate if:

- a. Any Team Member who has travelled outside of Canada or the province within the last 14 days is not permitted to enter any part of the facility and must quarantine and self isolate.
- b. Any Team Member with any symptoms of COVID-19 is not permitted to enter any part of the facility and must quarantine and self-isolate.
- c. Any Team Member from a household with someone showing symptoms of COVID-19 is not permitted to enter any part of the facility and must quarantine and self-isolate.
- d. Any Team Member who is in quarantine or self-isolating as a result of contact with an infected person or in families who are self-isolating, is not permitted to enter any part of the facility.



APPENDIX B - PARTICIPANT AGREEMENT

Application - all athletes, coaches, members, volunteers, participants and family members of participants while in attendance at club activities (“Participants”).

All Participants of WESBURN FOOTBALL CLUB (Wesburn Community Association) agree to abide by the following points when entering club facilities and/or participating in club activities under the COVID-19 Response plan and Return to Play Protocol:

- I agree to symptom screening checks and will let my club know if I have experienced any of the symptoms in the last 14 days.
- I agree to stay home if feeling sick and remain home for 14 days if experiencing COVID-19 symptoms.
- I agree to sanitize my hands upon entering and exiting the facility, with soap or sanitizer.
- I agree to continue to follow social distancing protocols of staying at least 2m away from others.
- I agree to abide by all of the club COVID-19 Policies and Guidelines.
- I understand that if I do not abide by the aforementioned policies/guidelines, that I may be asked to leave the club for up to 14 days to help protect myself and others around me. I acknowledge that continued abuse of the policies and/or guidelines may result in suspension of my club membership temporarily.
- I acknowledge that there are risks associated with entering club facilities and/or participating in club activities, and that the measures taken by the club and participants, including those set out above and under the COVID-19 Response Plan and Return to Sport Protocols, will not entirely eliminate those risks.

Date:

Signature of Parent:

Name of Participant:



APPENDIX C – RISK & INDEMNITY WAIVER

**RELEASE OF LIABILITY, WAIVER OF CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
BY EXECUTING THIS YOU WILL WAIVE CERTAIN LEGAL
RIGHTS, INCLUDING THE RIGHT TO SUE
PLEASE READ CAREFULLY**

TO: The British Columbia Soccer Association (the "Association") and its directors, officers, agents, representatives, employees, volunteers, members, participants, spectators, Districts, Leagues, Clubs, independent contractors, subcontractors, sponsors, successors and assigns (collectively the "RELEASEES")

DEFINITIONS: In this Agreement the term "soccer programs " shall include all activities, programs, events, classes, and services provided, sponsored or organized by the Association including but not limited to: games, tournaments, practices, personal training, dry land training, use of strength training and fitness conditioning equipment, machines and facilities, nutritional and dietary programs, orientational or instructional sessions or lessons, aerobic and anaerobic conditioning programs.

ASSUMPTION OF RISKS: I am the parent/guardian of the player being registered and have full legal responsibility for the decisions of said player. I believe my child/ward is physically, emotionally and mentally able to participate in soccer programs, and is doing so voluntarily and willingly.

I am aware that my child/ward's participation in soccer programs involves many risks, dangers and hazards, which could result in damage, loss, serious physical injury or death to my child/ward. I have spoken to my child/ward and have made my child/ward aware of these risks, dangers and hazards. Some

of these risks, dangers and hazards include, but are not limited to:

- Health: overexertion, dehydration, fatigue, lack of fitness or conditioning, traumatic injury, bacterial infections, rashes, and the transmission of communicable diseases, including viruses of all kinds,

bacteria, parasites or other organisms or any mutation thereof.

- Premises: defective, dangerous or unsafe condition of the facilities; falls; collisions with objects, walls, equipment or persons; dangerous, unsafe, or irregular conditions on grass, turf or other surfaces, extreme weather conditions; travel to and from premises
- Use of Equipment: mechanical failure of the equipment; negligent design or manufacture of the equipment; the provision of or the failure by the Releasees to provide any warnings, directions, instructions or guidance as to the use of the equipment; failure to use or operate the equipment within my own ability.
- Contact: I acknowledge that contact with soccer balls, other equipment, or other persons, whether intentional or unintentional, is a common part of soccer programs, and may lead to serious bodily injury, including but not limited to concussions and/or other brain injury, or serious spinal injury.
- Advice: negligent advice regarding soccer programs
- My child/ward's conduct and conduct of other persons including any physical altercation between soccer participants: I acknowledge that such conduct, including my child/ward's negligence and negligence of other persons, including NEGLIGENCE ON THE PART OF THE RELEASEES, may increase the risk of damage, loss, personal injury or death. I understand that the Releasees may fail to safeguard or protect my child/ward from the risks, dangers and hazards of soccer programs, some of which are referred to above.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the Releasees allowing my child/ward to participate in soccer programs, use its equipment and facilities and providing its soccer services and consultation, I hereby agree as follows:

1. TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against THE RELEASEES AND TO RELEASE THE RELEASEES from any and all liability for any loss,

damage, expense or injury including death that I or my child/ward may suffer or that my nextof-kin may suffer as a result of my or my child's/ward's participation in soccer programs DUE

TO ANY CAUSE WHATSOEVER, including but not limited to:

- negligence on the part of the Releasees;
- breach of contract by the Releasees;

- breach of warranty on the part of the Releasees in respect of the design, manufacture, selection, installation, maintenance or adjustment of equipment;
- breach of any statutory or other duty of care including any duty of care owed under the Occupiers Liability Act, R.S.B.C. 1996, c. 303, on the part of the Releasees; and
- the failure on the part of the Releasees to safeguard or protect me or my child/ward from the risks, dangers and hazards of soccer programs, some of which are referred to in the Assumption of Risks section of this Agreement.

2. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage, loss, expense or injury to my child/ward resulting from my child's/ward's participation in soccer programs DUE TO ANY CAUSE WHATSOEVER, including but not limited to negligence on the part of the Releasees; breach of contract by the Releasees; breach of warranty on the part of the Releasees in respect of the design, manufacture, selection, installation, maintenance or adjustment of equipment; breach of any statutory duty or other duty of care including any duty of care owed under the Occupiers liability Act, R.S.B.C. 1996, c. 303, on the part of the Releasees; and the failure on the part of the Releasees to safeguard or protect my child/ward from the risks, dangers and hazards of soccer programs, some of which are referred to in the Assumption of Risks section of this Agreement.

3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage, loss, expense or injury to any third party resulting from my child's/ward's participation in soccer programs.

4. Despite the risks, dangers and hazards of soccer programs, and fully understanding such risks, dangers and hazards, I wish my child/ward to participate in soccer programs with the Association, and I FREELY ACCEPT AND FULLY ASSUME all such risks, dangers and hazards and the possibility of personal injury, death, property damage and loss resulting therefrom.

5. This Agreement shall be effective and binding upon my heirs, next-of-kin, executors, administrators, assigns and representatives, in the event of my death or incapacity.

SAFETY: In entering into this Agreement I am not relying on any oral, visual or written representations or statements made by the Releasees with respect to the safety of soccer programs other than what is set forth in this Agreement.

INSURANCE: I am aware that the Association carries insurance and that should my child/ward become injured or cause personal injury or property damage to any third party while participating in soccer programs, my child/ward may or may not be entitled to insurance coverage depending on the terms and conditions of the Association's insurance policy.

JURISDICTION: This Agreement and any rights, duties and obligations as between the parties to this Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of British Columbia (BC), and I agree to attorn solely to the jurisdiction of the Courts of the Province of BC. Any litigation involving the parties to this Agreement shall be brought solely within the Province of BC and shall be within the exclusive jurisdiction of the Courts of the Province of BC.

By executing this form, whether on-line or by signature, you agree that you are the registering player's parent/legal guardian and that you have read, understand and are bound by the Agreement terms.

Date:

Signature of Parent:

Name of Participant: