

Stephen Leacock Tennis Club

2520 Birchmount Rd
Scarborough, ON M1T 2M5
(between Sheppard Ave E and Huntingwood Blvd)

Website: <http://www.stephenleacock-tennis.ca>
E-mail: stephenleacocktennisclub@gmail.com

Assumption of Risk and Waiver of Liability Relating to Coronavirus/Covid-19

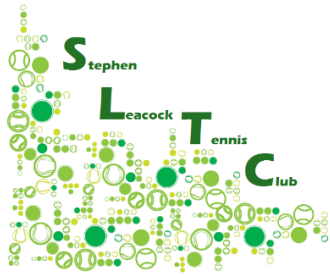
This waiver & declaration must be completed prior to or upon visiting *Stephen Leacock Tennis Club* and before participating in any activity.

The novel coronavirus, COVID-19 has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is known to spread mainly by contact from person to person. Consequently, local, provincial and federal governmental authorities recommend various measures and prohibit a variety of behaviors, in order to reduce the spread of the virus.

Stephen Leacock Tennis Club and its members commit themselves to comply with the requirements and recommendations of Ontario National, Provincial and local Public health and other governmental authorities, and to put in place and adopt all necessary measures to that effect. However, *Stephen Leacock Tennis Club* cannot guarantee that you (or your child, if participant is a minor / or the person you are the tutor or legal guardian of) will not become infected with COVID-19. Further, attending the Activities could increase your (or your child, if participant is a minor / or the person you are the tutor or legal guardian of) risk of contracting COVID-19, despite all preventative measures put in place.

By signing this document,

- 1) I acknowledge the highly contagious nature of COVID-19 and I voluntarily assume the risk that I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) could be exposed or infected by COVID-19 by participating in *Stephen Leacock Tennis Club's* activities. Being exposed or infected by COVID-19 may particularly lead to injuries, diseases other illnesses, even death.
- 2) I declare that I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) am participating voluntarily in *Stephen Leacock Tennis Club's* activities.
- 3) I declare that neither I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) nor anyone in my household, have experienced cold or flu-like symptoms in the last 14 days (including fever, cough, sore throat, respiratory illness, difficulty breathing).
- 4) If I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) experience, or if anyone in my household experiences any cold or flu-like symptoms after submitting this declaration, I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) will not attend any of *Stephen Leacock Tennis Club's* activities, programs or services until at least 14 days have passed since those symptoms were last experienced.
- 5) I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of), nor has any member of my household travelled to or had a lay-over in any country outside Canada, or in any Province outside of Ontario, in the past 14 days. If I (or my child, if participant is a minor / or



Stephen Leacock Tennis Club

2520 Birchmount Rd
Scarborough, ON M1T 2M5
(between Sheppard Ave E and Huntingwood Blvd)

Website: <http://www.stephenleacock-tennis.ca>
E-mail: stephenleacocktennisclub@gmail.com

the person I am the tutor or legal guardian of) travel, or if anyone in my household travels, outside the Province of Ontario after submitting this declaration, I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) will not attend any of **Stephen Leacock Tennis Club's** activities, programs or services until at least 14 days have passed since the date of return.

- 6) I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) agree to the requirements and recommendations of National, Provincial and local Public health and other governmental authorities and to those special safety regulations put in place by **Stephen Leacock Tennis Club** as it pertains the Covid-19 Coronavirus and to adopt all necessary measures to those effects.
- 7) I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of) agree that, by filling out and signing this waiver and agreeing to the terms and conditions set out in it, I am giving up my legal rights to sue **Stephen Leacock Tennis Club** and its officers and directors, in the event that I (or my child, if participant is a minor / or the person I am the tutor or legal guardian of), contracts the Covid-19 Coronavirus.

This document will remain in effect until **Stephen Leacock Tennis Club**, as per the direction of the national, provincial and local government and health officials, determines that the acknowledgments in this declaration are no longer required.

This document is in addition to and does not replace all other **Stephen Leacock Tennis Club** waivers.

I HAVE SIGNED THIS DOCUMENT FREELY AND WITH FULL KNOWLEDGE.

Name of participant (please print)

Name of parent / tutor / legal guardian (please print)
(if participant is minor or cannot legally give consent)

Signature of participant

Signature of parent/tutor/legal guardian

Place/Date: _____