



## Vienna Parks and Recreation

### COVID-19 RELEASE FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that the Town of Vienna Parks and Recreation has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that the Town of Vienna Park and Recreation cannot guarantee that I will not become infected with the Coronavirus/Covid-19.

I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Vienna Parks and Recreation staff, and other class participants and their families.

I voluntarily seek services provided by Vienna Parks and Recreation.

I acknowledge that I must comply with all set procedures by Vienna Parks and Recreation to reduce the spread while attending camps and classes.

**YES or NO, are you currently experiencing any of the following symptoms?**

- A new fever (100.4°F or higher), a sense of having a fever or had a fever within the past 72 hours without being on medication? Yes  No
- A new cough that you cannot attribute to another health condition? Yes  No
- New shortness of breath or difficulty breathing that you cannot attribute to another health condition? Yes  No
- New chills that you cannot attribute to another health condition? Yes  No
- A new sore throat that you cannot attribute to another health condition? Yes  No
- New muscle aches (myalgia) that you cannot attribute to another health condition, or that may have been caused by a specific activity (such as physical exercise)? Yes  No
- A new loss of taste or smell? Yes  No
- In the past 14 days, have you had close contact (within about 6 feet for 15 minutes or more) with someone with suspected or confirmed COVID-19? Yes  No
- Have you had a positive test for the virus that causes COVID-19 disease within the past 10 days? Yes  No

Anyone who answers YES to any of these patron screening questions will not be permitted to enter the community center.

I understand that if I do not attest to all 10 statements, I will not be permitted to participate in the Vienna Parks and Recreation class or activity for this particular day. It is recommended by the CDC to self-quarantine (stay home) and monitor your health for symptoms of COVID-19 for 14 days before returning to Vienna Parks and Recreation classes or activities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_