

APPENDIX C

AOA Daily COVID ATTESTATION

(Completed daily **PRIOR TO ANY** AOA/OST sanctioned activity)

1. Do you have symptoms consistent with COVID-19? **Fever, cough** (not related to asthma, post-infectious reactive airways, or other known causes or conditions you already have), **shortness of breath, out of breath, unable to breathe deeply**, (not related to asthma or other known causes or conditions you already have) **nausea, vomiting and/or diarrhea** (not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have).
 - Yes
 - No
2. **Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?** *This can be because of an outbreak or contact tracing.*
 - Yes
 - No
3. **Have you been in contact with someone with a confirmed case of COVID-19 within the past 14 days?**
 - Yes
 - No
4. **In the last 10 days, have you tested positive on a rapid antigen test or home-based self-testing kit?** *If you have since tested negative on a lab-based PCR test, select "No."*
 - Yes
 - No

Travel Information (remove this section if you are participating in a out of country project):

5. Have you travelled outside of Canada in the last 14 days and been told to quarantine?
 - Yes
 - No
6. Have you travelled outside of Canada in the last 14 days and been told not attend school?
 - Yes
 - No

If you answered YES to any of the above questions, you are not permitted to enter, participate or undertake operations in the workplace OR participate in any AOA sanctioned events (including, but not limited to AOA led dryland, AOA permitted travel, on-snow or off-snow activities scheduled by AOA) until a negative COVID-19 test is provided.

By adding my signature below, I agree this is a legal declaration to follow the laws, recommended guidelines and protocols issued by the government of the province in respect to COVID-19, including practising physical distancing and will do so to the best of my ability whilst participating in Alpine Ontario's sanctioned events.

<p>I hereby attest that the information provided above is to my knowledge, accurate and complete.</p> <p>Type your signature: _____</p> <p>Date/ Time of Signature: _____</p>	<p>Participation Status</p> <ul style="list-style-type: none">• Participation permitted• Participation not permitted
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