



COVID-19 Screening and Waiver

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and can be spread by droplets/aerosols breathed into the air by an infected person.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 through participation in CISV Toronto activities. I understand that the risk of becoming exposed or infected by COVID-19 may result from the actions, omissions or negligence of myself and others, including, but not limited to, CISV Toronto volunteers and program participants or their families.

I voluntarily agree to assume all of the risks associated with participation in CISV Toronto activities. I accept sole responsibility for any injury (including, but not limited to, personal injury, disability and death), illness, damage, loss, claim, liability, or expense, of any kind that I may experience or incur with my participation. I hereby release, discharge and hold harmless CISV Toronto, CISV volunteers, fellow participants and representatives, of any liability, claim, action, damage costs or expenses of any kind arising out of my participation. I understand that this release specifically includes any claim or liability that arises whether a COVID-19 infection occurs before, during or after participation in any CISV Toronto event.

PARTICIPANT DECLARATION (Please initial)

(a) neither I nor any member of my household has tested positive for COVID-19 or experienced any cold or flu-like symptoms within the previous 5 days (including one or more of fever, cough, sore throat, runny nose, headache, onset fatigue, new or onset muscle or joint pain, respiratory illness, difficulty breathing, nausea, vomiting, diarrhea or unexplained loss of appetite, or loss of taste or smell (collectively, "Indicative Symptoms"); _____ and

(b) if I or anyone in my household experience any Indicative Symptoms, or is waiting for test results after experiencing Indicative Symptoms, then I will not attend a CISV activity for a period of 5 days after Indicative Symptom(s) have completely disappeared; _____ and

(c) neither I nor any member of my household have travelled to or had a lay-over in any country outside Canada in the past 5 days, or had close contact within the last 5 days with an individual that has had a confirmed case of COVID-19 or who has exhibited Indicative



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Symptoms; _____ and

(d) if I or anyone in my household travel to any country outside Canada after submitting this Consent & Declaration, then I will not attend a CISV Toronto activity for a minimum period of 5 days after returning, regardless of whether I or anyone in my household experience Indicative Symptoms. _____

Participant Name and Date

Parent/Guardian Name and Signature (if participant is under 18)

Witness Name and Signature