

Victoria Synchro COVID-19 CODE OF CONDUCT FOR ATHLETES

(and Parents or Guardians of Athletes Under 19 Years of Age)

## I will help prevent COVID-19 infections by:

- Staying home when I feel sick
- Staying away from people who are coughing, or sneezing, or sick
- Washing my hands thoroughly and often with soap and water, before and after training, practice, or competition, or when I use the washroom
- Covering my coughs and sneezes with a tissue, or my elbow. If I use a tissue, I will throw it in the garbage right away and wash my hands
- Always keeping at least 2 metres between me and others
- Not sharing food, water bottles, towels, bathing suits, nose clips, goggles, or swim caps
- Respecting the rules of artistic swimming and understanding my responsibilities in contributing to a safe environment

## I will care for the health and safety of others and I understand that:

• I will be removed from sport immediately if I do not follow physical distancing or hygiene rules.

## I will care for my health and safety and I understand that:

- I have a commitment to preventing COVID-19 by telling a coach, parent or guardian, or another adult if I feel sick and to stop participating in training, practice, or competition immediately
- I should tell a coach, parent or guardian, or another adult if someone else tells me about cold or flu symptoms, or I see signs they might be sick
- If I have been exposed to a suspected or confirmed case of COVID-19, I will be removed from sport and I will not be able to return to training, practice, or competition for 14 days

## I will take the time I need to recover because it is important for my health and I understand that:

- If I have suspected or confirmed COVID-19, I will be removed from sport and I will not be able to return to training, practice, or competition until I have been medically cleared
- My coach or another person such as the club-designated COVID-19 response coordinator will submit an incident report through Saanich Commonwealth Place and Island Health if COVID-19 is suspected or confirmed

By signing here, I acknowledge that I have reviewed and commit to this COVID-19 Code of Conduct.

Athlete Name:	
Signature:	Date:
(Athlete if 19 and over)	
Signature:	Date:
(Athlete's Parent/Guardian if under 19)	