COVID-19 HEALTH QUESTIONNAIRE AND CONTACT INFORMATION

FORBIDDEN PLATEAU OBEDIENCE & TRACKING CLUB

PLEASE SUBMIT AT CHECK-IN – YOU WILL NOT BE ALLOWED TO PARTICIPATE WITHOUT IT.

To follow current BC Health Regulations due to COVID 19 there will be restrictions in place during trials and events. The FPOTC Safety Protocol was sent to you earlier. Please respect the guidelines to ensure we keep everyone safe. Anyone exhibiting any of the symptoms shown below will not be allowed on the grounds.

1. DO YOU HAVE ANY OF THE FOLLOWING SYMPTOMS?

- FEVER
- CHILLS
- COUGH
- SHORTNESS OF BREATH
- SORE THROAT
- RUNNY NOSE
- LOSS OF SENSE OF SMELL OR TASTE
- HEADACHE
- FATIGUE
- LOSS OF APPETITE
- NAUSEA AND VOMITING
- MUCSCLE ACHES
- CONJUNCTIVITIS (PINK EYE)
- DIZZINESS/CONFUSION
- SKIN RASHES OR DISCOLOURATION
- ABDOMINAL PAIN

2. HAVE YOU TRAVELLED OR HAD CLOSE CONTACT WITH ANYONE WHO HAS TRAVELLED INTERNATIONALLY WITHIN THE LAST 14 DAYS?

3. HAVE YOU COME INTO CONTACT WITH INDIVIDUALS WHO HAVE CONFIRMED OR PRESUMPTIVE DIAGNOSIS OF COVID-19 WITHIN THE LAST 14 DAYS?

4. HAVE YOU TESTED POSITIVE FOR COVID-19 IN THE PAST 14 DAYS?

I confirm that the answer to all questions above is no. I also accept and will abide by the guidelines of the FPOTC Covid-19 Safety Plan and any communications from the FPOTC respecting safety.

SIGNATURE ______ PRINT NAME _____

DATE _____ PHONE OR EMAIL _____