I understand I could get Coronavirus through sports, training,   
competition and/or any group activity at Special Olympics. I am choosing   
to participate in sports, competition and/or other Special Olympics activities   
at my own risk.

During the time these precautions are needed, I agree to the following to help keep me   
and my fellow participants safe:

|  |
| --- |
| * If I have COVID-19 symptoms, I will stay at home and NOT go to any activities until 7 days after all of my symptoms are over. If I am exposed to COVID-19 and have no symptoms, I must self-quarantine if required by local regulations |
| * Special Olympics gave me education on Special Olympics rules for COVID-19 and who is at high-risk. |
| * I know that if I have a high-risk condition, I have more risk that I could get sick or die from COVID-19. If I have a high-risk condition and am not fully vaccinated, I should not go to Special Olympics events in person, until there is little or no Coronavirus in my community. |
| * I know that before or when I get to a Special Olympics activity, they may ask me some questions about symptoms and exposure to COVID-19. They may also take my temperature. I will answer truthfully and participate fully. |
| * I will keep at least 6 ft/2m from all participants at all times, when asked |
| * I will wear a mask at all times while at Special Olympics activities when asked. I may not have to wear it during active exercise. |
| * I will wash my hands for 20 seconds or use hand sanitizer before any activities. I will wash my hands any time I sneeze, cough, go to the bathroom or get my hands dirty. |
| * I will avoid touching my face. I will cover my mouth when I cough or sneeze and immediately wash my hands after. |
| * I will not share drinking bottles or towels with other people. |
| * I will only share equipment when instructed to. If equipment must be shared, I will only touch the equipment if it is disinfected first. |
| * If I get or have had COVID, I will not go to any in-person Special Olympics events until 7 days after my symptoms end. I will go to my doctor and get written clearance before returning to any sport or fitness activities. |
| * I understand that if I do not follow all of these rules, I may not be allowed to participate in Special Olympics activities during this time. |

I HAVE READ ALL OF THIS AGREEMENT OR HAVE HAD IT READ TO   
ME AND AGREE TO FOLLOW THESE ACTIONS.

**PARTICIPANT FULL NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Circle one:** Athlete Unified Partner Coach/Volunteer Family/Caregiver Staff

**PARTICIPANT SIGNATURE** *(required for adult (age 18+) participants, including adult athlete with capacity to sign documents)*

By signing this, I acknowledge that I have completely read and fully understand the information in this form.

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

**PARENT/GUARDIAN SIGNATURE** *(required for participant who is a minor (younger than age 18) or lacks capacity to sign documents)*

I am a parent or guardian of the athlete/participant named above. I have read and understand this form and have explained the contents to the participant as appropriate. By signing, I agree to this form on my own behalf and on behalf of the participant.

**Parent/Guardian Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_

**Printed Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Relationship:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Subject to Change**

**Version: 6-28-2021**

**Who is at higher risk of COVID-19?**  
COVID-19 is a relatively new disease and information is changing on who is more likely to get COVID-19 and who is will have more complications.

Current clinical guidance and information from the U.S. Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO) lists those at high-risk for severe illness from COVID-19 as:

* Unvaccinated people 60 years and older. Risk increases with age.
* Unvaccinated people with disabilities (resulting from long-standing systemic health and social inequities)

Regardless of age, individuals who are **unvaccinated** and have underlying conditions, such as the following, are or maybe at increased risk of severe illness from COVID-19:

* People with chronic lung disease, chronic obstructive pulmonary disease or moderate to severe asthma, interstitial lung disease, cystic fibrosis, and pulmonary hypertension
* People who have serious heart conditions (including heart failure, coronary artery disease, congenital heart disease, cardiomyopathy, hypertension)
* People who have HIV and/or are immunocompromised
* People with obesity or who are overweight (body mass index [BMI] of 25 or higher). To calculate BMI, refer to:
  + <https://www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/english_bmi_calculator/bmi_calculator.html>
* People with cancer
* People with diabetes (Type 1 and 2)
* People with chronic kidney disease
* People with liver disease
* People with dementia
* People with down syndrome
* People who are pregnant
* People who are smokers, current or former
* People with a substance abuse disorder
* People with sickle cell disease or thalassemia
* People who have had a stroke or cerebrovascular disease

The list may change as evidence is learned. Please review the latest list of conditions that put individuals at increased risk available at the [CDC website](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html) (<https://bit.ly/2VEJcSK>)

If you are at a high risk and unvaccinated, you may be putting yourself at risk when you return to activities with Special Olympics. But, you may also put your family and your teammates at risk. If you have these conditions, it is strongly recommended that you should not return to Special Olympics in person activities until you are vaccinated or the community transmission in your community is low.

If you have been diagnosed with COVID-19, you should consult with a healthcare professional for written medical clearance before returning to Special Olympics in person activities as serious cardiac, respiratory, and neurological issues may develop as a result of COVID-19.