



RINK PROTOCOLS

Please see attached for Health and Safety Protocols and the screening waiver required to enter the arena.

1. Waivers must be filled out online prior to entering the arena - <https://forms.gle/LQiUNqvpsBKSd5hx6>
2. All staff, players & anyone entering the facility will be required to wear a face covering such as a cloth or disposable mask to help protect against the spread of the coronavirus. It is mandated by the Governor of the state of Connecticut that anyone ages 2 and up wear a mask. Masks are not required for players on the ice while their helmet is on. It is recommended that all coaches wear a mask while in the building and on the bench.
3. In efforts to contain the spread of COVID-19, while allowing hockey tournaments to happen, the NGHL has decided that **ONLY 1 spectator will be allowed into the arena.**
4. Everyone must sign a waiver prior to entering the facility. - <https://forms.gle/LQiUNqvpsBKSd5hx6> (*Please do this in advance, before arriving at the rink.*)

Colored NGHL wristbands will be handed out to each player, coach, and guardian following the check-in process. **Wristbands are required to be worn inside the facility at all times. Wristbands are non-transferable. Anyone without a wristband will be asked to leave the facility.**

Coach, player and guardian will be required to check-in each day to receive a new colored wristband. Please arrive early to facilitate the check-in process.

Note: In the event that social distancing, wearing a mask, and other rules are not followed, the NGHL will resort to a NO SPECTATOR POLICY (*Only a team manager, with wristband, will be allowed entry to monitor locker rooms, as required by SAFE SPORT)

5. Skaters must come to the rink **MOSTLY DRESSED**. They will be able to put on their helmet, gloves and skates in the rink...NO Exceptions! **Skaters MUST WEAR THEIR MASK UNTIL HELMETS GO ON and masks must be put back on when helmets comes off.**
6. All players will enter through the main entrance of the rink. Each team will be assigned one (1) locker room where they can tie their skates with a maximum of 6 or 8 players in the locker room at a time. Locker room doors will be left open to reduce hand touches to handles. Please do not leave valuables in the rooms.
7. Please bring your own water bottle - water foundations will not be accessible.
8. Only skaters, coaching staff and officials will be permitted in 20 minutes before the game.
9. Please arrive at least 30 minutes in advance to facilitate the check-in process.



10. Only 1 SPECTATOR PER PLAYER IS ALLOWED ENTRY 5 minutes before the start of the game. PARENTS ARE CONSIDERED SPECTATORS. No siblings allowed in the rink. Please plan accordingly.
11. Staff and customers should practice social distancing while in the arena. Please try to keep at least 6 feet or more and follow social distancing markings throughout the facility. Please follow all arrows and signage inside the arena to help with traffic flow. No lingering in common areas.
12. Please use a designated “x” on the floor of the arena to put your skates on or the assigned locker room (showers are closed).
13. Players and coaches are asked to sanitize their hands when they enter and exit the facility, please become familiar with locations of sanitizers.
14. Coaches will be allowed to remove their face mask (or other face covering) when taking the ice.
15. Games will be on streamed via LIVE BARN. Check out the league’s social media (@NGHLHockey) or the league website for more information.
16. Players will not huddle at any point during the game/practice. Sportsmanship will continue in a touchless manner – no handshakes/slaps/fist bumps after games.
17. After your session players may take off their skates and exit the facility fully dressed, through the “exit only” doors as quickly as possible. No loitering in the arena after your practice/game.
18. All NGHL Staff will be screened prior to the beginning of every shift for COVID-19 symptoms. Employees who are experiencing any COVID-19 symptoms will be sent home from work immediately.

Rink Amenities:

ISCC - Vending machines. No snack bar; no eating inside the rink.

Enfield - Snack bar open.

Bolton - Vending machines. No snack bar; no eating inside the rink.

We appreciate everyone’s patience and cooperation in adhering to these guidelines.



ADDITIONAL BOLTON AND ISCC RINK POLICIES

Coaches,

- Every team needs to follow these with **no exceptions**.
- There will be one warning given and then there will be disciplinary action.
- You, your manager or your scheduler will need to email these procedures out to every visiting team that you will be playing
- You, your manager or your scheduler should reach out to every team you are playing to make sure you receive their procedures and share with your parents before heading to another rink. Every rink's procedures are likely to be a little different.

Covid 19 – Practice and Game Procedures:

Entering the Rink:

- **Masks must be worn at all times.**
- Doors are locked until 20 minutes before the start of your ice time.
- Only skaters, coaching staff and officials will be permitted in 20 minutes before the game.
- Only 1 SPECTATOR PER PLAYER IS ALLOWED ENTRY 5 minutes before the start of the game. PARENTS ARE CONSIDERED SPECTATORS. No siblings allowed in the rink.
- Doors will be locked 10 minutes after the start of the game.
- Allowed into the rink for games are: Teams (including coaches), officials, scoreboard operator, score sheet volunteer and penalty box volunteer and 1 parent per skater.

Waivers:

- ISCC & BOLTON WAIVERS AND HEALTH QUESTIONNAIRES MUST BE COMPLETED EACH TIME YOU ENTER THE RINK.

Changing area/locker rooms:

- Skaters must come to the rink **MOSTLY DRESSED**. They will be able to put on helmets, gloves and skates in the rink....NO Exceptions!
- **Skaters MUST WEAR THEIR MASK UNTIL HELMETS GO ON and masks must be put back on when helmets comes off.**
- Home teams will be using the locker rooms. Two locker rooms will be assigned per team. Coaches will split teams up between both rooms.
 - There will be designated spots for sitting in locker rooms.



- o Players will exit through external exit doors in the locker room area after games.
- Away teams will have two sections to get dressed (A & B)
- The warm room and party room will be closed to everyone.

Spectating:

- Spectators are limited to one per player. (No siblings allowed)
- Spectators should sit in designated spots on bleachers.
- There will be limited designated standing areas around the rink.

REVISED SEPTEMBER 2, 2:45PM

ICE SKATING RINK PARTICIPANT-- READ BEFORE SIGNING --

In consideration of being allowed to participate in any way in all program, related events and activities of Champions Skating Center, LLC; ISCC, LLC; NEAC, LLC; Bolton Ice Palace, LLC, I _____, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown of my participation in all activities, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation in all activities. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE Champions Skating Center, LLC; ISCC, LLC; NEAC, LLC; Bolton Ice Palace, LLC, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I recognize and acknowledge that there are hazards and risks of physical injury or illness to myself in attending the Premises and participating in the activities and that not all such hazards or risks can be fully eliminated. I freely and voluntarily agree to assume the full risk of death, bodily injury or property damage, regardless of severity, that I (or my child/ward) may sustain as a result of my participation in the activities or attendance at the Premises, howsoever arising, including, but not limited to, the active or passive negligence of the Releasees.

Furthermore, the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and spreads from person-to-person contact.

Champions Skating Center, LLC; ISCC, LLC; NEAC, LLC; Bolton Ice Palace, LLC has put in place preventative measures to reduce the spread of communicable diseases; however, we cannot guarantee that you or your child(ren) will not become infected while attending our facilities. While we've implemented reasonable preventive measures, we depend on each and every visitor and their families to follow the guidelines from the Center of Disease Control, and all applicable federal, state, and local health department guidelines, rules, laws, and regulations before and while visiting our premises. We are all in this together and rely on each other to adhere to the above-mentioned guidance and legal restrictions. The undersigned fully understands and acknowledges both the known and potential dangers of utilizing our facilities, services, and programs and acknowledge that use thereof by the undersigned and/or such participating children may, despite our reasonable best efforts to mitigate such dangers, result in exposure to communicable diseases, which could result in quarantine requirements, serious illness, disability, and/or death.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

x _____ Date Signed: _____ Age: _____
PARTICIPANT'S SIGNATURE

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

x _____ Date Signed: _____
PARENT/GUARDIAN SIGNATURE

EMERGENCY PHONES # (s) _____

Daily Fit for Work and Customer Screening Questionnaire

We require you to fill out the below questionnaire to assist in determining your fitness for work or visitation during the COVID-19 pandemic to provide a safe environment for staff, athletes, customers and families.

The information in this questionnaire will be used and disclosed solely for the purposes of determining fitness for work or visitation during the COVID-19 pandemic.

You must follow hand hygiene protocols, and wear a mask when not involved in athletics on the ice or while training and remember to clean your keys, phone, computers and other personal items.

The questionnaire only relates to **new** symptoms or a **worsening** of symptoms related to allergies, chronic or pre-existing conditions. Those with symptoms related to pre-existing conditions or allergies can still go to work or visit.

Printed Name: _____ Signature: _____ Date: _____

Risk Assessment: Screening Questions

1.	Do you have any of the following symptoms which are new or worsened if associated with allergies, chronic or pre-existing conditions: fever, cough, shortness of breath, difficulty breathing, sore throat, and/or runny nose?	Yes	No
2.	Have you returned to the US or CT from a country or state with a travel advisory requiring a 14 day Quarantine in the past 14 days.	Yes	No
3.	Did you have close contact* with a person who has a probable** or confirmed case of COVID-19?	Yes	No
4.	Did you have close contact* with a person who had an acute respiratory illness that started within 14 days of their close contact* to someone with a probable** or confirmed case of COVID-19?	Yes	No
5.	Did you have close contact* with a person who had an acute respiratory illness who returned from travel outside of the US in the 14 days before they became sick?	Yes	No
6.	Did you have a laboratory exposure to biological material (i.e. primary clinical specimens, virus culture isolates) known to contain COVID-19?	Yes	No

If you answer “YES” to any of the above, you are not permitted to attend work or visit at this time and you must self-isolate.

If you answer “NO” to all of the above, you can proceed to work or with your visit. If you develop any of the above symptoms, please complete a new questionnaire. **Note:** If you have any other symptoms which are new or a change from your usual symptoms, then you should stay home and minimize contact with others until you are feeling better.

*Close contact includes providing care, living with or otherwise having close prolonged contact (within 2 meters) while the person was ill, or contact with infectious bodily fluids (e.g. from a cough or sneeze) while not wearing recommended [personal protective equipment](#).

**Probable case is a person with clinical illness who had close contact to a lab-confirmed COVID-19 case, while not wearing appropriate [personal protective equipment](#), OR a person with clinical illness who meets the COVID-19 exposure criteria, AND in whom laboratory diagnosis of COVID-19 is inconclusive. *Clinical illness* of a probable case is new onset/exacerbation of following symptoms: fever (over 38 degrees Celsius), cough, shortness of breath (SOB)/difficulty breathing, sore throat or runny nose. *Exposure criteria* for a probable case is a person who, in the 14 days before onset of illness: had any history of travel outside of the US; OR had close contact with a confirmed or probable case of COVID-19; OR is a close contact of a traveler with acute respiratory illness who returned from outside the US in the previous 14 days; OR had a laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19.