



COACH GAME DAY ATTESTATION & RELEASE OF LIABILITY

We're relying upon the good faith and honesty of each team to take care of and understand their personal health before participating with their team in the CPL. If your players do not feel well, do not let them show up. Advise them to get a test or self-isolate for 14 days until clear. Any cold or flu like symptom may be associated with COVID-19. Please keep everyone around you healthy. Keep yourself informed here: <https://covid19.colorado.gov/covid-19-data>

COVID-19 symptoms may include:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

*This list is not all-inclusive. Please consult your medical provider for any other symptoms that are severe or concerning. COVID-19 testing is free. Please go to <https://www.denvergov.org/content/denvergov/en/covid-19/recovery-guidance/testing.html> Any player that has potentially been exposed to COVID-19 must inform their coach and self-isolate for 10 days or until cleared by a medical professional. Any team that has potentially been exposed to COVID-19 must inform the league and self-isolate for 10 days or until players are cleared by a medical professional. Your games will be rescheduled. There will be no forfeits or fines associated with a team not being able to play due to COVID-19. **Coaches must do the work to be aware of the health of their team and give the league at least 12 hours notice.** If team finds that a player in a game has tested positive for COVID-19, the coach will inform the league. Contact tracing will be done and the players that are at risk informed. The players on both teams will need to self-isolate for 10 days or cleared by a medical professional. Games will be rescheduled.

The risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I or a team member could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease;

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume all full responsibility for my participation;

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, BEFORE ACKNOWLEDGING THE CHECKBOX BELOW, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY AGREEING TO IT ON MY OWN BEHALF OR ON BEHALF OF THE YOUTH PARTICIPANT ASSOCIATED WITH THIS GUARDIAN

I _____ attest that I have been in contact with each player on my team. I have discussed COVID-19 symptoms and protocols with every member. No one on my team or in contact with my team members in the last 14 days has shown symptoms or had a positive test for COVID-19.

Signature

Date