



# POODLE CLUB OF ONTARIO & MINIATURE POODLE CLUB OF ONTARIO



## COVID WAIVER

**AUGUST 21 & 22, 2021**

Property of Joanne Reichertz, 072117 10th Line, East Garafraxa, ON L9W 7A2

***Anyone who attends this dog show must sign this form. No exceptions!***

*Exhibitors, owners, handlers, breeders, assistants, volunteers, family members, friends, etc: If you are on the show grounds, this form must be filled out and on file with the club. This includes minor children under 18 years of age.*

I fully attest, to the best of my knowledge, that I do not have Covid-19 at the time of attending this show. I agree that I am attending the dog show entirely at my own risk and take full responsibility for my own health and safety during this event. I will follow the Poodle Club of Ontario and Miniature Poodle Club of Ontario rules, requirements, procedures, protocols and guidelines to reduce any exposure or the possibility of contracting or spreading the virus.

- Yes  No Have you experienced any cold or flu-like symptoms (fever, new or worsening cough, sore throat, chills, nausea, fatigue, shortness of breath, etc.)?
- Yes  No Have you travelled outside of Canada or been in close contact with someone who has travelled outside of Canada in the past 14 days?
- Yes  No Have you had close contact with a confirmed case of Covid-19 in the past 14 days?
- Yes  No Have you been tested for Covid-19 and are awaiting results?
- Yes  No Have you been advised by Ontario Public Health Services that you must self-isolate?

*If you answer "Yes" to any of the above questions, you will not be permitted on the show site.*

I fully submit that the Poodle Club of Ontario and Miniature Poodle Club of Ontario, Joanne Reichertz, staff or volunteers are in no way liable for any present or future Covid-19 exposure incurred at any time by any person in attendance or not in attendance during or after this dog show, and hereby waive all rights to file a lawsuit against the above if I am exposed to Covid-19. By signing this waiver, I hereby agree to all terms presented within this waiver.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contact (phone or email)

\_\_\_\_\_  
Print Name of Minor/Guardian

\_\_\_\_\_  
Signature of Minor under 18 years

***Print, sign and present this form upon arrival. No form, no access.***