

HEALTH HISTORY REVIEW
AND COVID-19 LIABILITY RELEASE FORM

Due to the COVID-19 outbreak, we are taking extra precautions with the intake of each member, staff and associates, health history review and sanitation and disinfecting practices.

Please read, review, sign and give to Royal Gymnastics office. This is required in order to enter the facility.

Symptoms of COVID-19 include:

- * Fever (100.4 and higher)
- * Sore Throat
- * Fatigue
- * Dry Cough
- * Difficulty breathing

I affirm that I and all my household members:

- Do not currently have, nor have experienced the symptoms listed above within the last 14 days.
- Have not been diagnosed with COVID-19 within the last 30 days.
- Have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days.
- Have not traveled outside the country, or to any city that is considered a “hot spot” for COVID-19 infections in the last 30 days.

I understand that Royal Gymnastics:

- * Mandate that I wear a face mask at all times while on the premises, with the only exception is children while in class.
- * Are all following CDC protocols for disinfection to thoroughly fight the spread of COVID-19.
- * Cannot be held liable for any exposure to the virus or any other contagion caused by misinformation on this form or the history provided by each member, staff and associates.

By signing below, I agree to each statement above and release Royal Gymnastics, Its owners and employees from any and all liability for the unintentional exposure or harm due to COVID-19.
I also commit to inform Royal Gymnastics management immediately and not enter its facility if any of the symptoms and circumstances stated above changes.

NAME PRINT

SIGNATURE

_____/_____/_____
DATE