



COVID-19 ATTESTATION AND AGREEMENT

By signing below, the Participant (named below) or the Participant's Guardian attests that the Participant:

1. Does not knowingly have COVID-19;
2. Is not experiencing any known symptoms of COVID-19, such as fever, cough, shortness of breath or malaise;
3. Has not travelled internationally during the past 14 days;
4. Has not, in the past 14 days, knowingly come into contact with someone who has COVID-19, who has known symptoms of COVID-19, or is self-quarantining after returning to Canada; and;
5. Has been following government recommended guidelines in respect of COVID-19, including practicing physical distancing.

Furthermore, by signing below, the Participant or the Participant's Guardian agrees that they will not at any time enter Tiara Equine's facilities if any of the above statements are false. Additionally, while attending or participating in Tiara Equine's events or attending at Tiara Equine's facilities, the Participant:

1. Will follow the laws, recommended guidelines, and protocols issued by the Government of the Province in respect of COVID-19, including practicing physical distancing, and will do so to the best of the Participant's ability while participating in Tiara Equine's events or attending at the Tiara Equine's facilities;
2. Will follow the guidelines and protocols mandated by Tiara Equine in respect of COVID-19;
3. Will, in the event that the Participant experiences any symptoms of illness such as a fever, cough, difficulty breathing, shortness of breath or malaise, immediately:
 - a. inform a representative of Tiara Equine by phone; and
 - b. depart from the event or facility.
 - c. seek out COVID-19 test if appropriate.
 - d. regardless of test results will not return to Tiara Equine until symptom free for 24 hours.

FOR PARTICIPANTS WHO HAVE BEEN DIAGNOSED WITH COVID-19

By signing below, the Participant (named below) or the Participant or the Participant's Guardian attests that the Participant has been diagnosed with COVID-19, but been cleared as noncontagious by provincial or local public health authorities and has provided to Tiara Equine, in conjunction with this COVID-19 ATTESTATION AND AGREEMENT, written confirmation from a medical doctor of the same.

Print Name: _____ **Date of Birth:** _____
the "**Participant**" (mm/dd/yyyy)

Print Name: _____
The "**Guardian**" (if Participant is a minor)

Signature: _____ **Date:** _____
Participant or Guardian for minor (mm/dd/yyyy)