COVID-19 REQUIREMENTS

I agree to abide by the developing guidelines set forth by CKSwimming to help prevent
the spread of COVID-19 or any other contagious diseases. I and my family will not
come to a practice/meet if we have a fever or are exhibiting symptoms of illness. If I find
that any of my family contracts the virus, I will notify CKSwimming as soon as possible.
understand that I or any of my family may be turned away from swimming if exhibiting
fever or other illness symptoms.

X	
☐ I've read the above and agree.	
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