



PRINT FORM – MUST BE COMPLETED PRIOR TO COMING TO LONGMONT GYM

L.A.C. COVID-19 CONSENT FORM

I, _____ (print name), knowingly and willing consent to attending/entering the Longmont Athletic Club during the COVID-19 pandemic. I understand that the COVID-19 virus has a long incubation period, which during that time carriers may not show symptoms, but still be highly contagious.

While the athletic club complies with the state health department and the Center for Disease Control and Prevention (CDC) guidelines, we cannot make any guarantees. Our staff is symptom-free and to the best of their knowledge, has not been exposed to the virus.

In order to reduce the risk and spreading COVID-19, we have employed reasonable precautions, including screening members and guests daily upon their arrival.

I confirm that I am not presenting any of the following symptoms of COVID-19 listed below:

- **Fever**
- **Shortness of Breath**
- **Loss of sense/taste/smell**
- **Dry cough**
- **Runny nose**
- **Sore Throat**

I understand that air travel, both domestically and internationally, increases my risk of contracting the COVID-19 virus and therefore would require a self-quarantine procedure of 14 days immediately following travel.

- **I verify that I have not traveled within/outside the United States, via airplane, in the last 14 days: _____ (Initials)**

I understand there are risks in coming to the gym to work out, and I am doing so under my complete own will. I do not hold the Longmont Athletic Club responsible if I contract the COVID-19 virus. I understand that LAC is following strict sanitation and social distancing guidelines set forth to ensure my safety and protection.

By signing below, you acknowledge your participation in the COVID-19 screening process and the truthfulness of your responses.

Address: _____ Phone: _____

Email: _____

Signature: _____ Date: _____

PARTICIPATE NAME: _____ TEAM NAME: _____