

Ticket to Play Form – ALL PLAYERS MUST BRING AN UPDATED FORM TO EVERY TRAINING

Player Name: _____

Today's Date: _____ Temperature Before Clinic: _____

Parent Cell Phone: _____

Questions to reply to about your Child: Yes or No

1. Your child is currently free from illness?
2. Your child has been free from illness for the past 14 days?
3. At this time your child has no diagnosis or reason to believe they have COVID-19?
4. If your child were previously COVID positive do you have medical documentation to support their clearance by your PMD to return to activity? (Don't have to answer if you have not been diagnosed with COVID-19)
5. Your child has NOT had any direct contact with someone who has COVID-19 in the past 14 days?
6. Your child has not been in or visited an area considered a COVID-19 "Hot Spot"?
7. Your child has not had to self-quarantine due to COVID-19 contact or symptoms in the past 14 days?

SYMPTOM CHECKLIST: (Yes or No)

- Fever
- Body Chills
- Extreme Level of Fatigue
- Cough or Shortness of Breath or Difficulty Breathing
- Pain / Difficulty Breathing
- Sore Throat
- Body / Muscle Aches
- Loss of Taste or Smell
- Changes to Vision / Eye Discharge
- Nausea, vomiting, diarrhea
- Headache

I have completed this form truthfully and to the best of my ability in regard to my child and their current health status. I understand that at this time there is not a vaccine or consistent treatment for COVID-19, and although NC Lacrosse Academy (NCLA) will take all steps required to mitigate risk to players and families, participation will be done at the player's own risk. NCLA is not liable for players or family members becoming sick or ill due to COVID-19 from participation in camp clinics.

Parent Signature

Date