

Saskatoon Kart Racers - Covid 19 Waiver

All SKR members, family members, track officials, vendors, or visitors attending scheduled practices or events must complete the following waiver. This is to protect other attendees and participants from potential exposure to the Covid-19 virus.

Potential Exposure to COVID-19.

| Please check a box for each question, Yes or No | | | | | | |
|---|------|---|---------------------------------------|---------------------------|--|--|
| Attende | e Na | ame: | YES | NO | | |
| | 1. | Have you or anyone in your household traveled internationally within the past 2 weeks? | | | | |
| | 2. | Have you been in contact with anyone in the past two weeks that has tested positive for COVID-19? | | | | |
| | 3. | Do you currently have any symptoms of COVID-19, including but not limited to a fever, dry cough, or flu-like symptoms? | | | | |
| | 4. | Have you or anyone in your household tested positive for COVID-19? | | | | |
| | 5. | Are you or anyone in your household awaiting test results for COVID-19? | | | | |
| the gove | nm | enswered YES to any of the above questions, the emergency measures nent of our province say you must self isolate, and therefore you must sor events until 2 weeks have past since: | | • | | |
| • T | he d | date the person who traveled internationally arrived back, | | | | |
| • Y | ou v | were in contact with someone who tested positive for COVID-19, or | | | | |
| • T | he d | date your last symptom(s) presented themselves. | | | | |
| | dire | sit these questions once two weeks have past and based on responses ection from the Saskatchewan Health Authority, will determine when a | | - | | |
| first 5 qu | esti | , acknowledge all statements are truthful, to the sis of today's date Given this extraordinary time perions asked regarding potential exposure to COVID-19 changes, I will not ember immediately (initials) | e best of lod, if an stify an S | f our ny of the SKR | | |

Attendee Waiver

I understand the health risks associated with attending SKR practices, work parties, and racing events (including but not limited to potential exposure to COVID-19) and accept said risk freely and willingly. I further understand the Saskatoon Kart Racers Corporation have not made any representation regarding the hygiene of those attending any SKR practice or the Martensville Speedway grounds.

I acknowledge being informed of the health risks by the Saskatoon Kart Racers Corporation and agree to save harmless the SKR officers and SKR Corporation from any claims, damages, judgments, etc., I may have as a result.

| If you have any questions regarding this quember. | iestionnaire, please contact a SKR cl | ub executive |
|---|---------------------------------------|--------------|
| Signed and dated at | , this day of | , 2021. |
| Attendee Signature | Witness | |
| SKR executive member Signature: | | |