



## **Acknowledgment of Risk Covid-19**

The novel coronavirus, COVID-19 has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is known to spread mainly by contact from person to person. Consequently, local, provincial, and federal governmental authorities recommend various measures and prohibit a variety of behaviors, in order to reduce the spread of the virus.

Pilates Fusion Inc. (hereinafter "PF") and its affiliated teachers/instructors, programs and services, cannot guarantee that you (or your child, if the student is a minor/ or the person you are the tutor or legal guardian of) will not become infected with COVID-19. Further, attending classes at PF could increase your risk of contracting COVID-19, despite all preventative measures put in place.

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By signing this document,

- 1) I acknowledge the highly contagious nature of COVID-19 and I voluntarily assume the risk that I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) could be exposed or infected by COVID-19 by participating in classes at PF. Being exposed or infected by COVID-19 may particularly lead to injuries, diseases, or other illnesses.
- 2) I declare that I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) am participating voluntarily in the classes at PF.
- 3) I declare that neither I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) nor anyone in my household, have experienced cold or flu-like symptoms in the last 14 days of my participation in the activities (including fever, cough, sore throat, respiratory illness, difficulty breathing).
- 4) If I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) experience, or if anyone in my household experiences any cold or flu-like symptoms after submitting this declaration, I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) will not attend classes at PF until at least 14 days have passed since those symptoms were last experienced.
- 5) This paragraph applies unless competent governmental authorities lift, from time to time, interprovincial or international travel bans or restrictions including imposing a quarantine period. If interprovincial or international travels are still in effect and a period

of quarantine is required by government authorities at the time of the present, I declare that I have not (or my child, if student is a minor/ or the person I am the tutor or legal guardian of), nor has any member of my household, travelled to or had a lay-over in any country outside Canada, or in outside of my Province or residence, in the past 14 days from the day of my attendance at PF. If I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) travel, or if anyone in my household travels, outside my Province of residence after submitting this declaration, I (or my child, if student is a minor/ or the person I am the tutor or legal guardian of) will not attend classes at PF, until at least 14 days have passed since the date of return.

This document will remain in effect for Pilates Fusion Inc., its teachers/instructors, programs and services, until the applicable provincial and federal governments' health officials determine that the acknowledgments in this declaration are no longer required.

I HAVE SIGNED THIS DOCUMENT FREELY AND WITH FULL KNOWLEDGE.

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Name of student (**print**)

Name of parent/tutor/ legal guardian  
(if student is minor or cannot legally give consent) (**print**)

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Signature of student (**sign**)

Signature of parent/tutor/legal guardian (**sign**)

Place/Date: \_\_\_\_\_