DCG ______ (sport) July Workout Protocol

Starting July 1:

- 1. Temps taken upon arrival, athletes should wear masks until after temps are taken and anytime 6ft of social distancing can't be obtained. Consider staggering pods to reduce gathering. Athletes and coaches may choose to wear masks at any time during the training period.
- 2. After temps have been taken athletes should establish a "camp" 6ft. away from the next athletes. Coaches must maintain a daily record of what athletes are participating, when, symptoms they may present (see attachment). Athletes should be monitored at start of practice for temperature >100.3F or symptoms of COVID-19 (fevers, chills, cough, muscle aches, headache, sore throat, runny nose, nausea, vomiting, diarrhea, or loss of taste or smell). If symptoms are present, they should not participate in practice and should be referred to a physician for evaluation and testing.
- 3. Athletes are encouraged to bring their own small bottle of sanitizer and water bottle. Shoes, towels, and other personal items. The use of locker rooms, shared water coolers, and water fountains will be prohibited during these training sessions.
- 4. Athletes will need to fill out the consent form (see below) and bring on the first day.
- 5. Workout Groups or Pods of no more than 10 ppl will be predetermined groups won't change from week to week.
- 6. Each group of 10 will maintain 6ft distance from the other groups and interaction between groups should be avoided.
- 7. At the conclusion of each workout, any equipment used will be cleaned thoroughly prior to the next session

Informed Consent Agreement for Participation in School Athletics (Return with athlete on July 1st)

Dear Parents, Guardians, and Student Athletes,

The State of Iowa declared a public health emergency on March 17, 2020 in connection with the COVID-19 pandemic. School and school activities for students were temporarily suspended. Subsequent state directives have allowed for ALL school activities to resume on July 1st, 2020. The Iowa High School Athletic Association ("IHSAA"), the Iowa Girls High School Athletic Union ("IGHSAU") have [issued guidance stating X?/statement

concerning athletics/etc.]. Accordingly, the Dallas Center - Grimes Community School District will resume activities beginning July 1st, 2020.

The District is taking reasonable measures to prevent the spread of infection, including tracking and following applicable state and federal guidance, as well as guidance from the IHSAA and IGHSAU. However, the possibility of transmission cannot be eliminated. Students and families must be aware of and acknowledge the risks before participating in athletics.

By initialing and signing this Informed Consent Agreement, you acknowledge, accept, and agree to the following (Parent/Guardian and Participant Must Initial and Sign):

Participation in athletics is purely voluntary.

_ My child has permission to participate in athletic meetings, practices and competitions as directed by the coaching staff.

_____ Neither myself nor my child will attend meetings, practice and/or competitions if any of the following apply:

a. Any member of our household is exhibiting symptoms of illness, such as cough, fever, or shortness of breath.

b. Any member of our household has been diagnosed with COVID-19 or has a suspected diagnosis of COVID-19.

c. Any member of our household has spent time with another individual who has been diagnosed with COVID-19 or has a suspected diagnosis of COVID-19.

I agree to immediately inform [Designated District Official] if any member of our household has been diagnosed with COVID-19 or has a suspected diagnosis of COVID-19.

I am aware that myself and my child may be exposed to COVID-19 while participating or attending meetings, practices and/or competitions. I understand that this exposure carries a risk of infection, serious injury, or death.

My child is voluntarily participating in athletics and I agree to assume any and all risks of infection, injury, or death, whether those risks are known or unknown.

_____ I forever release the District from any liabilities, causes of action, lawsuits, claims, demands, or damages of any kind whatsoever that I, my assignees, heirs, guardians, next of kin, spouse, and legal representatives have, or may have in the future, related to participation in athletics.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE OF THE RISKS OF PARTICIPATING IN ATHLETICS DURING THE COVID-19 PANDEMIC. I AM AWARE THAT THIS FORM CONTAINS A RELEASE OF LIABILITY.

(date)

Signature of Participant

Date

Date

Signature of Parent/Guardian

____ Temp Checks

(Varsity/JV)

(Sport)						
Name	Temp >100.3	Put a checkmark for any that apply				
		fever	cough	sore throat	trouble breathing	exposed to covid