

WAIVER

Belleville & District Kennel Club
Quinte Sports and Wellness Centre,
265 Cannifton Road Belleville ON K8N 4V8

Covid-19 Event Waiver- Dog Shows – October 22, 23 & 24, 2021

Notice: Anyone that Attends this Dog Show Must Sign this form and present it to the show secretary. No Exceptions

This is for Exhibitors, Owners, Handlers, Breeders, Assistants, Family Members, Friends Etc.- If you are on the Grounds, this Form Must be filled out and on File with the Club. This Also includes Minor Children Under 18 years old.

I fully attest to the best of my knowledge that I do not have Covid-19 at the time of attending this show. I also attest that I have NOT been in contact with or exposed to any known carrier of Covid-19 within the past 14 days. I agree that I am attending the Dog Show entirely at my own risk and take full responsibility for my own health and safety during this event. I will follow the Belleville & District Kennel Clubs rules, requirements, procedures, protocols and guidelines to reduce any exposure or the possibility of contracting or spreading the virus.

Yes / No

Have you travelled outside of Canada or been in close contact with someone who has travelled outside of Canada in the past 14 days? _____

Have you experienced any cold or flu-like symptoms (fever, new or worsening cough, sore throat or shortness of breath) or been in close contact with anyone experiencing cold or flu-like symptoms in the last 14 days? _____

I fully submit that the Belleville & District Kennel Club, and Quinte Sports and Wellness Centre, (Wally Dever Arena), staff or volunteers are in no way liable for any present or future Covid-19 exposure incurred at any time by any person in attendance or not in attendance during or after this dog show, and hereby waive all rights to file a lawsuit against the above if I am exposed to Covid-19. By signing this Waiver.

I hereby agree to following everything within this Waiver.

Signature_____	Signature of Parent/Guardian/Handler _____
Print Name:	Print Name of both signer and Minor _____
Phone Number: _____	Signature: Minor under 18yrs _____
Date:	

Print, Sign and present this Form upon arrival