

## COVID -19 Waiver

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?

Yes / No -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?

Yes/No - Have you had close contact with a case of Covid-19 in the last 14 days?

Yes/No - Have you been told by Public Health in the last 14 days to self isolate?

I fully submit that the Western Aussie Club and volunteer's at the show 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 competition, 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 everything within this Waiver

Signature \_\_\_\_\_

Print your name \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

Print, Sign and present this Form upon arrival to receive Access

A new Waiver is required EACH DAY