



FOOTBALL MANITOBA

Return to Football Guidelines

Updated July 14, 2021

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Return to play plans from members organizations of Football Manitoba must follow these protocols and will be approved by Football Manitoba to start activity no earlier than the 2nd of August 2021.

These protocols were developed under the guidelines set out in public health orders by the Province of Manitoba, with advice from Sport Manitoba, and in consultation with Football Canada and the provincial football governing bodies across Canada.

Introduction

Football Manitoba's top priority is the safety of our players, coaches, trainers, officials, volunteers, parents, administrators, and families. We will continue to follow the recommendations of Manitoba Health, the Provincial Government, & Sport Manitoba. Football Manitoba has recommended the policies & procedures in this document as a return to play guide to help clubs, leagues and organizations transition back into football when it is safe to do so. All cleaning and disinfecting procedures should come from Manitoba Health or the teams' equipment supplier/manufacturer for equipment procedures. The COVID-19 pandemic is a fluid situation that affects all sports and recreation; therefore, Football Manitoba will have updates on this document that will be released on our website as they are available.

How to Use This Document

This document is intended as a guideline for Football Manitoba members to return to football in accordance with the Government of Manitoba, Manitoba Health Authority, & Sport Manitoba. Information provided in this document is updated regularly as the COVID-19 pandemic is a fluid situation and can change daily. Members are encouraged to use this document to begin their return to football and can find appropriate recommendations based on the re-open phases.

¹General Safety Information & Guidelines

Symptoms

If for any reason a player or immediate family member is experiencing **any one** of the following symptoms, they should refrain from attending any group activity:

- 38°C or subjective fever/ chills
- Vomiting or diarrhea for more than 24 hours
- Sore throat / hoarse voice
- Loss of taste or smell
- Shortness of breath / breathing difficulties
- Cough

If for any reason a player or immediate family member is experiencing a new onset or worsening of **any two** of the following symptoms, they should refrain from attending any group activity:

- Runny nose
- Fatigue
- Headache
- Nausea or loss of appetite
- Muscle aches
- Conjunctivitis (pink eye)
- Skin rash of unknown cause
- Poor feeding (if an infant)

* If you have only one symptom in section B and it has been less than 24 hours since it started, stay home and avoid contact with others. Re-evaluate after 24 hours, and use the on-line COVID-19 Screening Tool. <https://sharedhealthmb.ca/covid19/screening-tool/>

If a player or immediate family member has travelled internationally or received a diagnosis of COVID-19 they must isolate for 14 days or until it is determined they are no longer a threat to public health. If you have attended a Football Manitoba event and are experiencing symptoms within 14 days after the event, please notify the Football Manitoba offices as soon as possible.

What is COVID-19?

First identified in the 1960s, coronaviruses (CoV) cause illness in humans and animals. Sometimes animal coronaviruses can infect humans. Only a handful of these coronaviruses that started in animals are able to spread person-to-person. Most of the coronaviruses that infect humans are associated with mild illness, similar to the common cold. However, some newer coronaviruses have caused more severe illnesses, such as Middle East Respiratory Syndrome (caused by the virus MERS-CoV), Severe Acute Respiratory Syndrome (caused by the virus SARS-CoV) and now COVID-19 (caused by the virus SARS-CoV-2).

¹ <https://manitoba.ca/covid19/index.html>

How COVID-19 Spreads

The virus can be spread through close contact (within two metres or six feet) with an infected person who is coughing or sneezing. You can also get COVID-19 by touching objects contaminated with the virus and then touching your mouth, eyes or nose.

Recent evidence indicates that COVID-19 can be transmitted by individuals who are not showing symptoms. This may include those who have yet to develop symptoms and those who may never develop symptoms.

Manitoba public health officials have provided guidance to health care providers about what should be done if they suspect someone has COVID-19. In addition, they are working with WHO and PHAC and other provinces and territories to respond to the evolving situation.

Treatment

As with most respiratory illnesses, most people with COVID-19 illness will recover on their own. There is no specific treatment for disease caused by COVID-19. Severe or worsening symptoms may require supportive treatment in hospital.

If symptoms feel worse than a standard cold, see a health care provider or call HealthLine at 811. If HealthLine 811 recommends you seek acute care, they will provide instruction to call ahead.

Currently, there is no approved vaccine that protects against coronaviruses, including COVID-19.

Vaccinations

Why get the COVID vaccine?

There are several good reasons to get immunized! It's about you, those around you, and helping all of us get back to a more normal way of life.

COVID-19 infection can result in death in ill and healthy people of any age. COVID-19 is highly contagious, especially the new variants. Even if a person does not die of COVID-19, they may have long term complications including memory loss, fatigue, unexplained breathing difficulties, and damage to the lungs and heart.

By getting immunized:

You will be protected from COVID-19. Your risk of serious illness, hospitalization or dying from the disease will be dramatically lower. This is a new virus, and even younger and healthier people have become very ill. Especially with the new variants of concern. Some people have lasting effects even from a mild infection.

You will help protect your family and friends from COVID, especially those who might be at higher risk of getting seriously ill.

You will help everyone get back to a more normal way of life, because once enough people get immunized, it will be much harder for COVID to spread or mutate.

Getting the vaccine is a personal choice. Doctors support and trust these new vaccines. We recommend them for nearly all Manitobans. If you are unsure, we have more answers to common questions here, or talk to your doctor about your personal concerns.

<https://www.manitobavaccine.ca/answers/why-get-the-covid-vaccine/>

How to Protect Yourself

As a respiratory illness, the best method to protect yourself against COVID-19 is to practice everyday preventive actions, including:

- Practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow);
- Wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer;
- Avoid touching your eyes, nose and mouth with unwashed hands;
- Clean and disinfect your home regularly;
- Maintain safe food practices;
- Avoid close contact with people who are sick;
- Avoid unnecessary travel to affected areas; and
- Avoid large crowds and practice physical distancing (do not shake hands, hug, or kiss).

Evidence suggests wearing a surgical/medical mask does not prevent the wearer from becoming sick; however, it may provide an additional layer of protection for those around them if they are sick. The World Health Organization supports wearing a medical mask as one prevention measure that can limit the spread of certain respiratory viral diseases, including COVID-19. If a mask is worn, it should be done in addition to other preventative measures as noted above, and not in place of them. If you are experiencing respiratory symptoms such as cough or difficulty breathing, you should wear a surgical mask when seeking medical care at a health facility. If possible, please phone the facility prior to attending. If you are going to a health care facility for treatment, are experiencing respiratory symptoms and do not have a mask, ask for one at the admission desk and one will be provided to you.

Insurance

As with most insurance for many sports and businesses, there will be no coverage for anything related to the COVID-19 Pandemic. **All** players, coaches, staff, volunteers and officials must sign waivers prior to returning to football. Football Manitoba has developed waiver templates which can be found in [Appendix C](#) of this document.

Football Safety Guidelines

To ensure safety for all participants, Football Manitoba recommends the following guidelines related to football specific activities when they are allowed:

- Consider having one or more individuals as Covid-19 representatives who are responsible for monitoring physical distancing, hand sanitizing, etc. during practices, camps, game play.
- Personal water bottles only
- Consider having coaches call plays from the sidelines rather than in a team huddle.
- Consider adding additional timeouts to allow for hand hygiene during each half.
- Provide additional footballs if possible, to allow for more frequent equipment switches and sanitize footballs with disinfecting wipes or alcohol as often as possible.
- Discourage players from removing and re-inserting mouthguards. Mouthguards should be sanitized if they fall out.
- Consider electronic or handheld whistles for officials
- No handshakes
- Disinfecting procedures for practices & games
- Disinfecting procedures for all personal & field equipment

- Spectator limitations according to the current public health orders.
- Equipment handouts should be scheduled by appointment to keep the numbers as low as possible (under 30 people together at any given time). All personnel handing out equipment should be wearing masks and wipe down the space used to equip at the end of each session.
- It is recommended all personnel on the sidelines that will have contact with the athletes within 6ft (i.e. athletic therapists, trainers, volunteers, equipment manager) should wear medical/surgical masks (n95 masks are not required). Homemade masks are not recommended.
- Any player found to have a positive test for COVID-19 and have been exposed to the other participants on that team, would cause the team/club to immediately shutdown. The specific management of a positive test in a player/coach/staff will be managed by the Manitoba Provincial Health officials and it is recommended to call Health Links- Info Santé at 204-788-8200 or 1-888-315-9257 immediately for advice on proceeding appropriately.
- Testing policies & procedures are rapidly evolving and will be updated as more information becomes available.

Facilities

Indoor and outdoor facilities will adhere to the Government of Manitoba's COVID-19 policies & procedures. Several recommendations include:

- Print and post signage outlining policies and procedures such as:
 - Physical distancing expectations,
 - Hand hygiene,
 - Respiratory etiquette (coughing and sneezing)
 - Cleaning and disinfection practices and expectations.
- Ensure availability to handwashing, or alcohol-based hand sanitizer at the site available to all participants for all program activities.
- Provide participant only zones where spectators cannot enter
- Physical distancing among spectators, staff and volunteers is to be maintained, and may require measures to promote physical distancing in seating areas
- Provide adequate entry options that allows for correct social distancing measures and where possible provide one-way entry and exit points.
- Do not allow loitering after participation for either participants or spectators
- Spectators, participants and players, staff, coaches, and volunteers should try to minimize cheering and whistling as much as possible as COVID-19 has been shown to spread through vigorous vocalization. Noisemakers and other cheering devices are permitted, providing they do not go in the mouth or nose (eg. drums are allowed, whistles are not).
- If restrooms and/or showers are available, either restrict access or limit the number of users at a given time, maintain hand washing supplies, increase cleaning and disinfecting frequency, install no-touch garbage bins and ensure areas are disinfected frequently
- Mask use may be required at many venues.
 - **NOTE:** Each facility will have their own requirements and will be required to follow the municipal and provincial guidelines and restrictions. It is suggested that you use the above guidelines to ensure facilities have the above minimum requirements.

Tackle Football Equipment

Tackle football equipment distribution, equipment maintenance, & practice/game day equipment guidelines will be addressed in [Appendix B](#).

Football Operation Guidelines

Contact and non-contact football teams and organizations should adhere to the following policies & procedures established by the Government of Manitoba:

Guidelines for General Operation

Risk Assessment and Mitigation Tool for Recreational Activities in Manitoba Operating During the COVID-19 Pandemic:

In response to the COVID-19 pandemic, Manitoba closed or restricted many recreational activities. As Manitoba begins to lift or adjust restrictive public health measures, it is important that those responsible for recreational activities consider the possible risks and identify and implement risk mitigation measures when re-opening or operating during the COVID-19 pandemic. Use this tool along with relevant provincial and national activity-specific guidance (e.g. sports or arts organizations). Public health measures taken by participants, organizers and operators for recreational activities are part of Manitoba's collective approach to mitigate the transmission of COVID-19. There is currently preliminary evidence suggesting that the risk of COVID-19 transmission is greater in indoor compared to outdoor settings. Although the risk of COVID-19 transmission in outdoor settings is thought to be lower, there is still some risk of transmission. This tool is based on concepts outlined in the guidance developed for community-based measures titled: Community-Based Measures to Mitigate the Spread of Coronavirus Disease (COVID-19) in Canada. It reflects the currently available scientific evidence and expert opinion and is subject to change as new information on transmissibility, epidemiology, and effectiveness of public health and risk mitigation measures becomes available.

Risk Assessment

What are the COVID-19 risks associated recreational activities?

The following facts about COVID-19 and associated questions can help you consider the risks of COVID-19 for participants and spectators.

The risk level is affected by whether there is COVID-19 activity in the local community. If there is known COVID-19 activity in your community, the likelihood that it could be introduced to participants of recreational activities is higher. The risk of COVID-19 introduction and spread is also presumed to be greater if a higher proportion of individuals visiting the indoor/outdoor spaces or participating in the activity comes from outside of your community and/or is coming from a community with higher rates of COVID-19.

COVID-19 spreads from person to person, most commonly through respiratory droplets (e.g., generated by coughing, sneezing, singing or talking) during close interactions (i.e., within two metres/six feet). People who have COVID-19 may have few to no symptoms, or symptoms may be mild.

Consider the following when planning recreational activities.

- Do participants interact with many other people while using the indoor/outdoor space or during the activity? A higher number of interactions with others carries greater risk.
- Do participants interact closely (two metres/six feet) with others while in the indoor/outdoor space or during the activity? Closer interactions carry greater risk than interactions at a distance.
- Do participants have prolonged close interactions with others while in the indoor/outdoor space or during the activity (e.g., team sports, martial arts, boxing, musicians in a group setting)? Prolonged contact is defined as lasting for more than 10 minutes of time being less than two metres away, and may be cumulative (i.e., over multiple interactions). Evidence indicates that person-to-person spread is more likely with prolonged contact.
- Is the indoor/outdoor space or recreational activity crowded (e.g., high density of people) on a regular basis? A crowded setting is presumed to have greater risk.
- Do any interactions occur in enclosed/cramped indoor spaces (e.g., use of restrooms, use of locker/dressing rooms for changing for an activity or sport)? Being in a confined indoor space carries a greater risk.
- Are participants singing? Is this in a group setting? There is some preliminary evidence that this is a higher-risk activity.
- Can you maintain lists of participants for 21 days to ensure appropriate public health follow-up can take place if a participant be exposed to COVID-19 during these activities?

COVID-19 can also be spread through touching something with the virus on it, then touching your mouth, nose or eyes before washing your hands.

- Do participants frequently have contact with high-touch surfaces (i.e. surfaces frequently touched by others)? A higher number of contacts with high-touch surfaces (e.g. shared recreation equipment, climbing structures, restroom facilities, handrails, floor mats, shared instruments or props) is presumed to have greater risk.
- Are facilities available where participants can wash and/or sanitize their hands after contact with high-touch surfaces (e.g., access to hand hygiene stations/supplies)?

COVID-19 can cause more severe illness among people who are 60 and over, and those who have compromised immune systems or other underlying medical conditions (underlying medical conditions could include: heart disease, high blood pressure, diabetes, lung disease, cancer).

- Are there participants or spectators who may be at higher risk of severe illness?

COVID-19 spread can be reduced by consistently practicing personal protective practices.

- Are participants able to follow hygiene practices such as washing hands frequently, respiratory etiquette (coughing into one's arm/sleeve), and identifying when they are feeling ill and staying home?

Risk Mitigation

How can COVID-19 risks be mitigated in indoor/outdoor recreational activities?

To prevent or limit the spread of COVID-19 during recreational activities, consider the following risk mitigation principles and measures.

The most effective risk mitigation measures are those that involve separating people from each other or shared surfaces through physical distancing and physical barriers. Measures that are less effective but still offer protection when followed, rely on individuals to consistently follow personal preventive practices (e.g., use of personal protective equipment, wearing non-medical masks).

To maximize safety, use a “layered” approach with multiple measures to reduce the risk of COVID-19 spread, including decreasing the number of interactions with others and increasing the safety of interactions. Layering of multiple mitigation measures strengthens the risk mitigation potential overall.

The following examples of risk mitigation measures are provided for your consideration. The following list is not exhaustive – you are encouraged to find creative and adaptive ways to mitigate risk in your setting that align with public health advice.

People who are ill should NOT participate in or be spectators of recreational activities.

- Post signage to discourage individuals who are ill from accessing the activity space or participating in the recreational activity.
- Ask participants if they have symptoms of COVID-19. Use Manitoba's online screening tool before the start of the activity, and direct individuals who are ill or have symptoms of COVID-19 to not participate or spectate.

- Require participants (players, employees, coaches) and spectators to stay at home if they have any symptoms until criteria to discontinue isolation have been met, in consultation with the local public health authority or their healthcare provider.

Promote and facilitate personal protective practices. Everyone plays a part in making recreational activities safer.

- Keep participants informed about public health advice applicable to your setting or activity.
- Promote personal health practices, including frequent hand hygiene, or foot hygiene when participants are barefoot (e.g. judo), avoidance of touching the face, and proper respiratory etiquette.
- All clothing, uniforms and gear should be washed/cleaned/disinfected between each use. Avoid sharing between participants whenever possible.
- Frequently clean and disinfect commonly touched surfaces (e.g. handles, benches, equipment between use). Provide sanitizing wipes that participants can use to wipe down surfaces.
- Provide increased access to hygiene facilities (e.g. by placing alcohol-based hand sanitizer or hand-washing stations in prominent locations) and ensure accessibility for participants with disabilities or other accommodation needs.

Promote physical distancing (keeping a distance of two metres/six feet from others), which is one of the most effective ways to reduce the spread of illness.

- Focus on aspects of your activity or sport in which it is possible to maintain physical distancing (e.g. individual skill building).
- Discourage or prohibit the presence of spectators wherever reasonably possible.
- Limit the number of participants and spectators, as allowed in Manitoba, in indoor/outdoor spaces to prevent overcrowding.
- Provide signage at indoor and outdoor spaces reminding users of physical distancing requirements (e.g. two metre/six feet separation between individuals and households).
- Create appropriate spacing in areas where people would congregate (e.g. line ups, spacing of players sitting on benches).
- Modify indoor and/or outdoor spaces to promote physical distancing (e.g., convert narrow hallways or walkways to “one-way” to facilitate physical distancing).

- Use visual cues to promote appropriate spacing (e.g. floor markers for “one-way” flow of person traffic, spacing markers on spectator stands for organized activities).
- Consider closing or modifying non-essential indoor spaces (e.g., close locker rooms and have participants change clothes and shower at home).
- Restrict occupant capacity of indoor spaces such as restrooms and change rooms (e.g., close stalls to manage volume/occupancy without enforcing).
- Consider smaller league/team sizes/smaller groups of participants whenever possible (e.g. smaller groups of musicians practicing as opposed to a full orchestra).

Mitigate risks from exposure to high-touch surfaces (e.g., surfaces frequently touched by others).

- Limit the use of shared equipment during recreational activities. Any shared equipment should be cleaned between use (stepover bags, footballs, etc).
- Increase frequency of environmental cleaning, especially of high-touch surfaces that continue to be accessed (e.g. water fountains, handrails, floor mats).
- If restrooms and/or showers are available, limit number of users at a given time, maintain handwashing supplies, increase cleaning and disinfecting frequency and install no-touch garbage bins.
- Consider increasing access to temporary alcohol-based hand hygiene stations/supplies. Children may need supervision to ensure effective hand hygiene is performed.

Mitigate risks during programming.

- Consider the type of activity and the spectrum of risk. Sports with less potential for physical contact (e.g., tennis) are presumed to carry less risk, whereas sports with more potential for contact (e.g., football, basketball) are presumed to carry more risk. Performing arts that involve close physical contact between participants or have a larger number of participants also carry more risk.
- Consider modifying the activity to reduce contact risk (e.g. no contact rules or focus on practices/skill development instead of games, minimize close contact and the number of participants in performing arts activities).
- Consult COVID-19 specific guidelines published by the leading authorities in your activity that can assist your risk mitigation strategy for person to person interactions.

- Organizers should consider the developmental stage and ability of participants when implementing mitigation measures for programs.
- Consider smaller participant groups and stagger them, if possible, to decrease the opportunity for close contact.
- Separate participants by two metres/six feet at all times, as much as possible.
- Consider engaging community members, staff, or parents of participants to:
- Monitor physical distancing between coaches, participants and spectators. Monitors can remind individuals to maintain their distance; and
- Ask participants, coaches and spectators if they have symptoms of COVID-19 before the start of the activity, and direct individuals who are ill or have symptoms of COVID-19 to not attend/participate. Encourage them to use Manitoba's COVID-19 online screening tool.
- Limit the use of shared equipment during activities and clean and disinfect equipment after each use.
- Wash or sanitize hands before and following the activity, especially following contact with shared equipment. Require that each participant consumes only their own water and food (this may mean bringing multiple water bottles and hydrating before the activity).
- Participants should be encouraged to change at home and come ready for practice/participation in their activity (e.g., bring their own water bottle and towel).
- Ensure parents and spectators practice physical distancing.
- Discourage or prohibit the presence of spectators wherever reasonably possible.
- Eliminate team huddles at the beginning and end of game fist-bump /handshake routines.
- In the event that a participant requires first aid, consider having a family member attend to the injured. If not possible, the first aider should use appropriate personal protective equipment, including medical mask, gloves, and face shield. First aid kits, gloves and medical masks should be stocked and available.
- Modify the space or activity to reduce how long participants are in contact with each other and how many participants come into contact with each other.
- Close or restrict access to non-essential features or common areas that encourage people to gather (e.g., locker rooms except for washroom access).

- Consider unidirectional (“one-way”) traffic on busy/narrow hallways or entrances to limit close face-to-face contact between participants and remind people to keep to their right at all times and, merge into a single file as needed.
- Stagger use of facilities for different groups to reduce number of contacts.

Mitigate risk for people at higher risk of severe illness.

- Provide special accommodations for participants from vulnerable groups (e.g. dedicated times for seniors to use the outdoor space or access the recreational activity).
- Consider increased environmental cleaning prior to use of the facilities by known vulnerable groups.

Should participants/spectators of recreational activities wear non-medical masks?

- The wearing of non-medical masks or cloth face coverings is an additional personal practice that may help to prevent the infectious respiratory droplets of an unknowingly infected person (the wearer) from coming into contact with other people and surfaces.
- In most circumstances non-medical masks or cloth face coverings are not deemed necessary in indoor or outdoor spaces when physical distancing is possible and can be predictably maintained. However, use of these masks may be considered if physical distancing is not possible or is unpredictable, and local epidemiology and community transmission warrant it.
- For sports where a face shield can be used (e.g. hockey), a face shield may be considered.
- In some activities, wearing a non-medical mask may not be practical or tolerable, e.g., in activities that require physical exertion there might be a risk of poor oxygenation, easily soiled/moistened mask due to sweating/heavy breathing, or risk from injury if the mask is caught on equipment.
- Non-medical masks should not be placed on young children under age two as they may be unable to remove the mask without assistance, which could impair their breathing.
- Children and youth in the same activity group will have recurrent interactions with one another, much like those of family members or people in a household. For this reason, non-medical masks may not be recommended. It will be important that group sizes are small and that the same children/youth, staff and volunteers are grouped together as much as possible.

- The ability of a child/youth to complete tasks and follow direction will be dependent on a variety of factors (e.g. age, maturity, physical ability, comprehension). It will be important for child/youth staff and/or volunteers to assess ability to properly use and care for non-medical masks, based on the individuality of children/youth.
- It should be expected that some children/youth will wear non-medical masks in settings that have not adopted non-medical masks policies. Staff and volunteers should monitor for, and address, any discrimination or bullying associated with this practice (whether stigmatization is experienced by those who wear masks, and/or those who do not) and monitor for proper use.

If you choose to wear a non-medical or cloth mask, you must do the following:

- Wash your hands immediately before putting it on and immediately after taking it off.
- Practice good hand hygiene while wearing the mask.
- Ensure your mask fits well (doesn't gape).
- Do not share your mask with others.
- Face masks can become contaminated on the outside, or when touched by your hands. Avoid touching your face mask while wearing it, change your mask as soon as it is damp or soiled and place the mask directly into a bag or into the washing machine, launder your mask on a hot cycle and dry it thoroughly.

https://www.gov.mb.ca/asset_library/en/coronavirus/activities-guidelines.pdf

Emergency Action Plan (EAP)

A few points to consider for current emergency action plans:

- Do the responsible staff understand the risks and transmission routes of COVID-19, the steps that training attendees can take to limit spread, the recognized
- best-practices (including respiratory etiquette, hand hygiene, physical distancing, etc.), and the travel restrictions from different regions that may affect the team gathering to train?
- Will there be daily health checks of athletes/staff?
- Is there an Emergency COVID-19 Outbreak Response Coordinator with defined roles and responsibilities, coordinating the health preparedness and response planning for any cases or contact?
- Have the organizers and facility managers acquired the Personal Protective Equipment (e.g. masks, gloves, gowns) to help reduce the risk of transmission of COVID-19?
- Have the organizers and facility managers acquired hand sanitizer and alcohol rubs/gels, tissues, frequently replaced soap canisters and closed bins for safe disposal of hygienic materials (e.g. tissues, towels, sanitary products) in washrooms and changing rooms?
- Have the organizers and facility managers acquired hand sanitizers and alcohol rubs for all training room entrances and throughout the venue?
- Is there a procedure for athletes/staff to clearly identify whom to contact, and how to do so, if they or other participants feel unwell or show signs of an acute respiratory infection?
- Is there a protocol regarding whom medical staff should contact to report suspected cases, and request testing and epidemiological investigations, if someone is feeling unwell or showing signs of respiratory infection?
- Are there isolation rooms available on site until patients are dealt with appropriately?
- Are there any designated medical facilities that manage patients with COVID-19 infection in the region? Are contact numbers and procedures clearly visible?
- Are there established screening measures, including temperature checks and morning monitoring in place for participants before arriving and on-site medical facilities (first- aid points)?
- For more information on healthcare provider/AT guidelines & screening please see [Appendix A](#).

Appendix A – Football Canada Healthcare Provider Guidelines

Personal Responsibilities

1. Wash Your Hands. Good hand hygiene helps prevent the spread of the virus when touching surfaces where it could be present. Team healthcare providers should wash their hands:

- (1) Before touching an athlete.
- (2) Before cleaning/disinfecting procedures.
- (3) After body fluid exposure (including respiratory secretions).
- (4) After touching an athlete.
- (5) After touching athlete surroundings (ie. Equipment, external environment).

In addition to performing hand hygiene at all “5 moments of hand washing”, hand hygiene should also be performed in the following situations:

- Before putting on personal protective equipment (PPE) and after removing it.
- When changing gloves.
- After any contact with an athlete with suspected or confirmed COVID-19 infection, or the environment in the athlete’s immediate surroundings.
- Before and after using the bathroom.
- After the handling and disposing of garbage.

If hands are not visibly dirty, an alcohol-based hand sanitizer may be used (for 20-30 seconds, until hands are fully dry). However, if hands are visibly dirty, they should be washed with soap and water, and scrubbed for 20-40 seconds.

2. Physical Distancing: Physical distancing is the recommended method of preventing contact with respiratory droplets that may contain COVID-19. It is the practice of keeping space between yourself and others outside your household (6 feet or more). Maintain at least 3 meters (10 feet) of distance between yourself and any exercising athlete, as respiratory droplets can travel farther while breathing heavily.

3. Avoid Touching Eyes, Nose and Mouth. Touching infected surfaces can spread the virus to your hands. If you touch your eyes, nose, or mouth, the virus now has a method of entering your body. Good practice also includes refraining from touching the front of your mask.

4. Practice Respiratory Hygiene. Covering your mouth and nose with your bent elbow or tissue when you cough, or sneeze reduces the likelihood that the virus will be spread to your hands and reduces potential surface exposure. Tissues should be disposed of immediately after use. The use of personal protective equipment (masks) to reduce the spread of respiratory droplets.

5. Routine Cleaning and Disinfecting. Frequently touched surfaces are the most likely to become contaminated with pathogens (examples include doorknobs, light switches, toilet handles, counters, handrails, and touch screen surfaces/ keypads). A routine cleaning and disinfecting routine can help reduce the spread of the virus from surfaces to hands.

6. Seek Medical Care Early. Early intervention is critical to reduce the chance of spreading the virus to others. Stay home if you are ill, seek medical attention (call ahead) if you have a fever, cough and/or difficulty breathing, or any other documented symptoms.

Administration

1. Pre-participation Medical History Forms. Before athletes commence their seasons, participants should complete appropriate medical forms. A guardian should complete and sign these forms if the athlete is underage. New medical forms should be completed and signed each sport season. They should include an authorization for the release of medical information to others (specify whom on section of the form), as related to participation, injuries, and possible contact tracing. Documentation should be kept for a period designated by national, provincial authorities and legal counsel.

2. Acceptance of Risk. Athletes and/or guardians (if the athlete is underage) must complete and sign acceptance of risk forms that contain information related to COVID-19. Participants must be made aware of the risks of participation and agree to participation. Documentation should be kept for a period designated by national, provincial authorities and legal counsel.

3. Identifying At-Risk Athletes. Athlete medical forms should be screened by team healthcare providers prior to participation to identify at-risk athletes for severe illness.

Risk factors include:

- Uncontrolled moderate/ severe asthma
- Serious heart conditions
- Diabetes
- Immunosuppression (cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, immune weakening medications)
- Chronic kidney disease undergoing dialysis
- Liver disease
- Severe obesity (BMI of 40 or higher)

Efforts should be made by the team healthcare provider to communicate the risks for severe illness to these individuals, so they can make an informed decision about participating in sport.

4. Legislation. It is highly recommended to familiarize yourself with your local and provincial health recommendations and orders. Be sure to contact your Provincial Sport Organization or league to inquire how they intend to implement the specific regulations, and for more information related to participating in football in your area.

5. Education. Relevant education and training should be provided to all athletes (and guardian(s), if underage) and team staff related to COVID-19 regulations and best health practices. Education and training should include the following topics: hand and respiratory hygiene, physical distancing, personal protective equipment, protocols if a participant contracts COVID-19 (from Provincial Public Health Authority), COVID-19 testing, recommendations regarding group and individual return to play, and any COVID-19 rulebook amendments.

Ideally, learning should be completed online or via correspondence, where possible. Confirmation of completion should be recorded. Documentation of training completion should be kept for a period designated by national, provincial authorities and legal counsel.

6. Venue Selection. The adequacy of the facilities used for athletic events should be evaluated prior to use, to ensure that they adhere to the local and provincial regulations pertaining to participating in sport during COVID-19.

Recommendations:

- Outdoor playing area.
- Controlled point of entrance/ exit.
- Social distancing markers at entrance/ exit.
- Common areas that allow for physical distancing between athletes (2 meters apart).
- Ability to post signage related to social distancing, hand and respiratory hygiene
- Universal hand washing station present, and hand sanitizer stations positioned throughout the venue.
- Closed bins for the safe disposal of hygienic materials in the washrooms and around the facility.
- Handicap door opening buttons, OR the ability to wedge open doors.
- Dedicated isolation area for any ill individual.

7. Infection Response Plan. It is recommended that each team/ organization have a COVID-19 infection response plan, for the occasion if a participant becomes ill.

Recommendations:

- Have a dedicated room for isolation, for use by the ill individual.
- Immediately provide the individual with a mask and gloves.
- Advise individual to go home, self-isolate, and contact physician immediately.
- Advise individual to seek COVID-19 testing, following Provincial Public Health Authority's recommendations.
- Comply with contact tracing.
- Temporary suspension of team activities, as per Provincial Public Health Authority's recommendations.
- A "return to sport" protocol, for if/when a participant contracts COVID-19. Protocol should include information related to asymptomatic testing of other team members (where permitted by Provincial Public Health Authority), and minimum number of healthy participants required for team/league participation.
- Documentation of infection response plan should be kept for a period designated by national, provincial authorities and legal counsel.

8. Pre-Participation Screening.

All team members (including athletes and team staff), must complete COVID-19 screening questions prior to participation. The team healthcare provider should work with the coaching/team staff to ensure the completion by all team members prior to each practice and game. Individuals should not attend practices or games if they have symptoms of COVID-19, if they have been in contact with someone that is confirmed to have COVID-19, or if they have travelled outside the province/country (as per Provincial Public Health Authority) in the last 14 days. A screening checklist can be found in Appendix B.

9. Contact Tracing.

Contact tracing is one of the key tools necessary to reduce the spread of COVID-19, and consists of methods to identify and locate individuals who may have been exposed to the virus, in an effort to keep them away from others. This can prevent a single positive case from growing into several cases. It is important to keep spectators and participants separated during any event to simplify contact tracing. Contact tracing also helps identify where the virus is being spread, and if any areas of concentration exist. Contact tracing is typically the responsibility of Provincial Public Health. **In Manitoba, please call Health Links- Info Santé at 204-788-8200 or 1-888-315-9257.**

To assist with contact tracing interviews, records should be kept of all individuals entering the sporting venue. It is recommended that:

- Each team is to provide a roster of all participants and team staff to the individual in charge of game day operations, prior to any game.
- A form should be provided at the venue entrance with the following information for participants to fill in before entering: date, venue, name, telephone number, email, time in/ time out of venue, if they have completed COVID-19 screening questions prior to entering the venue, and permission to retain this data for specified amount of time.

Personal Protective Equipment

Personal Protective Equipment (PPE) are items that are designed to protect the wearer from injury or the spread of infection or illness, and include: protective clothing, gloves, face shields, goggles, facemasks and/or respirators or other equipment. PPE should not be a replacement for poor hand hygiene, and lack of social distancing.

Recommendations. All adult personnel on the sidelines that will have close contact with the athletes (ie. team healthcare providers, equipment managers) should wear masks and gloves. Disposable masks and cloth masks are recommended for general public and sport use.

- ***Putting on (donning) a surgical mask:***
 - (1) Wash your hands before touching the mask.
 - (2) Inspect the mask for tears or holes.
 - (3) Find the top side where the metal piece or stiff edge is.
 - (4) Ensure the coloured side faces outwards.
 - (5) Place the metal piece or stiff edge over your nose.
 - (6) Cover your nose, mouth, and chin.
 - (7) Adjust the mask to your face without leaving gaps on the sides.
 - (8) Avoiding touching the mask.
- ***Mask Removal:***
 - (1) Wash your hands.
 - (2) Remove the mask from behind the ears or head.
 - (3) Keep the mask away from you and surfaces while removing it.
 - (4) If surgical mask, discard the mask immediately after use, preferably in a closed bin.
 - (5) Wash your hands.
- ***If needing to store a reusable mask:***
 - (1) Follow normal mask removal steps 1-3 (above).
 - (2) Gently stretch ear loops to flatten the mask (lengthwise), try to avoid touching the very front part of the mask.
 - (3) Hold with one hand by ear loop.
 - (4) With other hand, open a paper bag or envelope.
 - (5) Carefully place the folded mask inside the bag/envelope.
 - (6) Close paper bag/ envelope, ensuring one ear loop is accessible at top of bag.
 - (7) Wash your hands.
- ***Mask should be discarded or replaced:***
 - At the end of a shift/practice.
 - When it is visibly soiled.
 - When it becomes damp (sweat, humidity from breathing).
 - When the user has touched the front of the mask.

- If the mask comes in direct contact with another person.
- When the user has been directly exposed to respiratory droplets.

It is recommended to use appropriate techniques for putting on and taking off gloves. Gloves should be discarded after each contact with athletes or debris, and replaced if they become ripped, torn, punctured, or compromised in any other way. Medical examination gloves are not intended to be re-used, even in settings with low resources, where glove supply is limited.¹⁶

Cleaning & Disinfecting

Cleaning visibly dirty surfaces, followed by disinfection is the best measure to prevent the spread of COVID-19 in non-healthcare, community settings.

1. Cleaning. The removal of dirt and impurities from surfaces using a combination of soap and water, with some sort of mechanical action (ie. scrubbing), and a final rinsing with water. This is done before disinfecting.

2. Disinfecting. The use of chemical products to kill germs on surfaces. Common disinfectants are chlorine and alcohol based. Examples of disinfecting agents are:

- Ethanol 70-90% (alcohol)
- Chlorine-based products (e.g., hypochlorite)
- Hydrogen peroxide >0.5%

3. Contact Time. Refers to the length of time the solution sits on a surface. A contact time of a minimum of 1 minute is recommended for the disinfectants above but be sure to read the recommendations from the manufacturers.

4. Recommendations:

- Prepare cleaning and disinfecting solutions daily, according to manufacturer's recommendations. Take note of the required contact time for the product.
- Ensure good ventilation and PPE while preparing solutions.
- The minimum recommended PPE for a non-healthcare setting is rubber gloves, impermeable aprons, and closed shoes. Eye protection and medical masks may also be used.
- Clean visibly dirty surfaces with soap (or detergent) and water to remove surface debris prior to disinfecting.
- Identify high-touch surfaces as a priority for disinfection (door handles, counter tops, bathroom surfaces, toilets and taps, touchscreen personal devices, and work surfaces) and disinfect using an appropriate disinfectant.
- Use fresh cloths at the start of each cleaning session. Discard cloths that are no longer saturated with solution.
- Routine cleaning and disinfecting measures should take place before and after event, as well as prior to re-opening a venue that has been unoccupied for 7 days or more.
- There is no evidence that spraying or fogging with disinfectants will prevent the transmission of COVID-19.
- Cleaning and disinfecting of wooden surfaces (play structures, benches, tables, bleachers) is not recommended.

Athlete Protective Equipment

Team healthcare providers may be asked to assist with aspects of equipment management operations. Becoming familiar with equipment handout/ fitting practices, and cleaning/disinfecting procedures promotes team efficiency and consistency.

Equipment Handout and Fitting

- Equipment handout and fitting should be done by scheduled appointment to keep venue numbers low, and compliant with local health mandates.
- All personnel handling equipment should be wearing gloves and a mask, as COVID-19 protocols require. Gloves are changed between appointments.
- All equipment should be disinfected before handing out.
- With the completion of every fitting, the tools used should be disinfected before moving onto the next fitting.
- Once the tools are disinfected, they should be stored away in a toolbox or small tote bin.

Protective Equipment Cleaning. Equipment should be kept with the participant only and should be disinfected at the conclusion of each practice/game, as well as before returning to equipment manager at end of season. Allow all equipment to completely dry before storage and avoid storing it in dark/moist areas.

- **Helmets:** Refrain from using commercial cleaners and polishes, as they can cause damage to the helmets and shell liners (and therefore void the warranty). Disinfectant wipes or regular dish soap with water are recommended for regular cleaning.
- **Should pads:** Should be cleaned of dirt and debris, then disinfected using a disinfectant wipe.
- **Clothing:** Game and practice jerseys, game pants, socks, girdles, and knee pads should be laundered as per manufacturer's instructions.

Mouthguards. Mouthguards are a natural breeding ground for bacteria, viruses, yeast, and mold. Good mouthguard hygiene should be encouraged to reduce the chance of infection or illness:

- **Storage:** Encourage athletes to store their mouthguards in clean, hard, vented cases.
- **Basic cleaning:**
 - (1) Rinse the mouthguard immediately after use.
 - (2) Brush with a non-abrasive toothpaste and toothbrush with soft bristles
 - (3) Rinse it again with warm water.
 - (4) Soak mouthguard in antibacterial mouthwash for 30 seconds. (5) Rinse again with water.
- **Disinfecting:** Three possible methods for disinfection are:
 - (1) Vinegar and hydrogen peroxide combination: Soak mouthguard in distilled white vinegar for thirty minutes, then rinse it, and soak it in hydrogen peroxide for thirty minutes.
 - (2) Mixture of mouthwash and water: Pour a capful of mouthwash into a glass and dilute this with water, then soak mouthguard for thirty minutes.
 - (3) Mixture of dental cleaner and water: After soaking in any of these solutions, rinse mouthguard thoroughly with water and then allow it to dry completely before using it again.
- **Replacement:** Mouthguards should be replaced after each season, and if they are dropped on the ground during play.

- **Eye Protection.** Visors may provide a barrier to help reduce the transmission of COVID-19 if the athlete cannot maintain social distancing, or if they attempt to touch their face. Contact lenses are not sufficient to protect against virus transmission.

Travel

Commuting, domestic travel and international travel provide their own unique sets of considerations to consider prior to participation. Team healthcare providers may be asked to advise on these matters, within their team or organizational roles.

Local Commuting Recommendations:

- Carpooling with others outside your household is not recommended.

Overnight/ Out-of-town Trip Recommendations:

1. Minimize the duration of travel and stay.
2. Minimize the number of individuals attending, essential roster and staff only.
3. All staff and athletes should ensure prior to leaving their homes that they are symptom free.
4. Pre-participation COVID-19 screenings should occur daily while away.
5. If travelling by bus, ensure that the bus has been thoroughly cleaned before use.
6. Inquire about potential of solely using one specific bus for the duration of the trip, to avoid sharing bus with other groups.
7. Avoid buffet style dining, and stagger mealtimes to avoid other groups.
8. Each team should ensure that they have adequate out of province health insurance coverage prior to travelling, as well as cancellation insurance.
9. Teams should prepare sufficient PPE, alcohol-based hand rub and disinfecting wipes for the trip.

Air Travel Recommendations:

- Clarify airline policies and be aware of any that preclude travel.
- Avoid layovers, if possible.
- Allow extra time for additional airport COVID-19 screening/security procedures.
- Athletes and team staff should use non-medical masks or face coverings during their journey, when they cannot maintain physical distancing.
- Each athlete and team staff member should ensure that they have adequate out of province/country health insurance coverage prior to travelling, as well as cancellation insurance.
- Athletes and team staff should prepare sufficient PPE, alcohol-based hand rub and disinfecting wipes for the trip (not baby wipes).
- If an athlete or team staff member becomes ill on the flight: avoid contact with others, and inform the flight attendant or border services officer.

Appendix B – Screening Checklist

Symptom and exposure screening questions (check all that apply)

A. Do you have a new onset, or worsening, of any ONE of the following symptoms?

Yes

No

- Fever > 38°C or subjective fever/ chills
- Cough
- Sore throat/ hoarse voice
- Shortness of breath/ breathing difficulties
- Loss of taste or smell
- Vomiting or diarrhea for more than 24 hours

If “yes” to any one of the above, DO NOT ENTER

B. Do you have a new onset, or worsening, of any TWO of the following symptoms?

Yes

No

- Runny nose
- Muscle aches
- Fatigue
- Conjunctivitis (pink eye)
- Headache
- Skin rash of unknown cause
- Nausea or loss of appetite
- Poor feeding (if an infant)

If “yes” to any two of the above, DO NOT ENTER *

* If you have only one symptom in section B and it has been less than 24 hours since it started, stay home and avoid contact with others. Re-evaluate after 24 hours, and use the on-line COVID-19 Screening Tool.

<https://sharedhealthmb.ca/covid19/screening-tool/>.

Exposure history		Yes	No
1.	Have you, or a member of your household, been in close contact (within 2 metres / 6 feet for more than 10 minutes total over 24 hours) in the last 14 days with a confirmed COVID-19 case?		
2.	Have you been exposed to COVID-19 in a work or public setting?		
3.	Have you or a member of your household, traveled outside of Manitoba in the past 14 days and are required to self-isolate (quarantine) **		
4.	Is a member of your household sick with COVID-19 symptoms, and waiting for COVID-19 test results? ***		
5.	Are you, or a member of your household, waiting for COVID-19 test results? ***		
<p>If “yes” to any of the above, DO NOT ENTER. Take the online screening tool https://sharedhealthmb.ca/covid19/screening-tool/</p>			

** Exemptions from self-isolation (quarantine) orders include some essential workers and those that are fully immunized, if they have no symptoms.

*** Exemptions are in place for asymptomatic household members if they are an essential worker required to wear medical grade PPE while at work, such as health care workers and first responders.

If the checklist advises you Not to Enter: stay home, isolate and refer to the **online COVID-19 Screening Tool** <https://sharedhealthmb.ca/covid19/screening-tool/> or call Health Links – Info Santé at 204-788-8200 or toll free at 1-888-315-9257 for further guidance. Up to date information on COVID-19 can be found at: www.manitoba.ca/covid19/index.html

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https://manitoba.ca/asset_library/en/coronavirus/covid19_screening_checklist.pdf

Appendix C – Equipment Manager Guidelines

Distribution of Player Equipment

- The distribution of any personal equipment should be completed in a facility that can maintain physical distancing of 2 metres (6ft) and would be best outdoors, if possible. The use of tape to mark off physical distancing areas is recommended.
- The scheduling of player fitting should be in 30-minute intervals to allow for proper fitting and adjustments if needed as well as the cleaning of any tools used
- The equipment manager should have all the equipment to be distributed close at hand, along with their tools. The tools required to complete the fitting should be laid out on a table nearby to allow for easy and quick access, they should also have Sanitizer spray or Wipes and a garbage can.
- Before the equipment manager proceeds with any fitting, they should first be wearing a mask and wash their hands for at least 20 seconds. Equipment fitters do not require gloves but can be worn if it makes the individuals more comfortable.
- The player being outfitted should also be wearing a mask and wash their hands/apply sanitizer before starting the fitting. The player should try to avoid touching his/her face or equipment while being suited up.
- With the completion of every fitting, the tools (Pump, Glycerin, Screwdriver, Drill, Pliers, Scissors, etc.) should be wiped down and disinfected before moving on to the next fitting.
- It is recommended all equipment be sanitized before distribution and any equipment that has been tried on and not given out, should be sanitized before the next player. For proper sanitation procedures, it is recommended for teams & leagues to contact their equipment suppliers/makers.

Field Equipment

- Player equipment should be spaced out to maintain physical distancing.
- Clean and disinfect shared equipment frequently. Depending on the activity, this may be after each player's use, between sessions, at specified breaks, after switching stations, and between groups.
- Providing each player with assigned equipment or allowing the use of self-owned, disinfected equipment. Where possible equipment that is handled by hands or head, and other personal items, should not be shared.
- Re-use of items that cannot be easily cleaned and sanitized should be avoided
- Coaches should come prepared with their own practice plans, training tools, technology and avoid sharing with other coaches
- Assigning the coach or one individual to be responsible for all set-up and take down of equipment (such as bags, nets, cones, etc.) to reduce the number of contact points.

Footballs

- The footballs should be stored in a zippered vinyl bag, if a vinyl bag is not available, a mesh bag or tote bin will suffice.
- At the end of a practice the footballs should be counted and then wiped down with proper disinfectant.
 - Composite balls can be wiped down and stored away immediately.
 - Leather balls should be wiped down and put aside to dry completely before storing them away.

Practice/Game Day

- If a player drops their mouth guard it should be disinfected or replace it with a new one.
- All players should leave their helmets on during the duration of a practice or a game situation, if possible.
- At the end of a practice or game, the players should take all clothing (i.e. jersey, practice pants, girdle, socks) home to be washed, the helmets and shoulder pads should also be wiped down daily and after every use, paying close attention to the face mask area.

Water Bottles/Hydration station

- Players should bring their own water with them from home; the use of water fountains and team water bottles/jugs should be discouraged.
- Water bottles should be clearly marked with the players first and last name.
- Players should take home their water bottles and have them washed nightly
- If a hydration station is available, it should only be used if there is someone available to wipe down the handles & nozzles after every use.

Appendix D – Waivers & Forms

Waiver

Appendix A – Waiver of Liability

I fully understand and acknowledge that there are many risks in participation in any sport or other activity connected with Manitoba Amateur Football Association Inc., (hereafter “Football Manitoba”), including a risk of serious injury, paralysis, death, property damage, or loss due to the nature of the sport of football.

In consideration of being permitted to participate in any activities of Football Manitoba and/or any of its member clubs or organizations, I hereby release and expressly waive any right of any claim for myself, and for my heirs, executors, administrators, personal representatives, successors and assigns and as against Football Manitoba (and/or any of its member clubs or organizations), their Directors, Officers, Agents, Coaches, Officials, Referees, Trainers, Physiotherapists, Doctors, Managers, any Volunteers, and Employees, and their respective heirs, executors, administrators, personal representatives, successors and assigns (the “Releasees”), jointly and severally of and from any and all claims, demands, rights and causes of actions of whatsoever any kind and nature, arising from or by any reason and for any loss or any death, sickness, or loss or damage to property including loss or theft of personal property incurred by me any time during my participation in any activity connected with Football Manitoba (and/or any of its member clubs or organizations), whether such claims or liability arises from the conduct of any of the said persons organizing, supervising or conducting the activities of Football Manitoba (and/or any of its member clubs or organizations), or any negligence, gross negligence, breach of contract, nuisance, tort or other cause of action whatsoever which may now exist or come into existence at any time in the future, including without limitation, a failure on the part of the Releasees to safeguard or protect me from the risks, dangers and hazards in participating in activities associated with Football Manitoba (and/or any of its member clubs or organizations) and for the same consideration I hereby expressly waive any right of claim in respect of the foregoing.

I hereby irrevocably grant to Football Manitoba (and/or any of its member clubs or organizations) the exclusive right to permit, authorize, any form or corporation to take and make use of any still photographs, motion pictures, or electronic digital or television pictures of me or my likeness as well as the reproduction of my name in connection with my participation in the activities of Football Manitoba (and/or any of its member clubs or organizations) and which may be used, reproduced, distributed, or otherwise disseminated by Football Manitoba directly or indirectly in any manner it desires.

I further represent and warrant that I will not participate in any activity of Football Manitoba (and/or any of its member clubs or organizations) unless I am in good health and have no physical condition that would prevent me from participating in those activities.

I certify to my knowledge that I have not been diagnosed with COVID-19 or, if I have been so diagnosed, that I have been advised by a medical professional that I am no longer contagious. I also certify that, to the best of my belief, I have not been exposed to anyone who has tested positive for COVID-19 or other such infection in the last 14 days and I am not currently suffering from any related symptoms including but not limited to fever, difficulty breathing, pneumonia, cough or loss of smell. I also certify that I will follow any and all directions or instructions from Football Manitoba or other Releasees related to the use of personal protective equipment and other safety measures during my participation in Football Activities.

I further agree not to make any claim or take proceedings against any other person or corporation who might claim contribution or indemnity under the provisions of The Tortfeasors and Contributing Negligence Act, R.S.M., c.266 and the amendments thereto or any similar law or legislation from any of the parties having the benefit of this release.

I acknowledge that I am of the full age of eighteen years, or, if not, I have obtained the consent of my parent or legal guardian to participate in the activities of Football Manitoba

(and/or any of its member clubs or organizations).

Signature:

Parent/Guardian Signature (if applicable):

Date:

Declaration Template

APPENDIX B: DECLARATION OF COMPLIANCE – COVID 19

Team/Association/Cohort (print): _____

RESPONSIBLE PERSON (print) _____

Email: _____

Telephone: _____

Football Manitoba, and _____ (name of Team/Association/Cohort collectively the “Organization”) require the disclosure of exposure to illness in order to safeguard the health and safety of all participants and limit the further outbreak of COVID-19. This Declaration of Compliance must be returned to the Team/Association/Cohort’s league as well as Football Manitoba within two weeks of the start of activities and will not be disclosed unless as required by law or with your consent.

Individuals (or the individual’s parent/guardian, if the individual is younger than 18 years old) who are unable to agree to the terms outlined in this document are not permitted to enter the Organization’s facilities or participate in the Organization’s activities, programs, or services.

I, the undersigned being the RESPONSIBLE PERSON above, hereby acknowledge and agree to the terms outlined in this document:

1. The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and COVID-19 is extremely contagious. The Organization has put in place preventative measures to reduce the spread of COVID-19 and requires all individuals (or their parent/guardian, when applicable) to adhere to the compliance standards described in the Football Manitoba Reopening Document (as written below).

RESPONSIBLE PERSON:

Each team/cohort’s RESPONSIBLE PERSON will ensure the following:

- Ensure each registered member (including all associated adults) with the team/cohort fills out the Informed Consent Form (see Appendix “A”) prior to starting on-field. These documents will be held in their possession for the season and then filed with the team at the conclusion of activity for 2020 to be secured for the next seven years. These must be available to be produced upon demand from their league/association or Football Manitoba.
- Ensure a Compliance Form (this form) is filled out on behalf of the team/cohort and filed with their league/association and Football Alberta within two weeks of commencement of team/cohort activity. Failure to do so will result in Insurance being withdrawn from the team/cohort.
- Ensure a Cohort List (Appendix “C”) is created and maintained for the duration of team/cohort activities

for 2021. This will be put into use to assist contact tracing should there be a positive case or outbreak within the team/cohort. This does not need to be filed with any other group just maintained and available upon demand.

- Screen each participant each day with the Screening Checklist (See Appendix “D”) and take appropriate action if anyone answers “Yes” to any of the questions.
- Ensure that Membership/Insurance is acquired and paid from Football Manitoba within two weeks of the start of activity for their team/cohort and that on-line registration is completed as well. Details on how that will occur can be obtained by contacting the offices of Football Manitoba.
- Ensure all sanitation and cleaning requirements are conducted as listed below each day and follow any guidelines set out in that area by the municipality or school providing the facility.
- Ensure all participants and their parents/guardians are fully aware of the General Safety Guidelines listed below.

Regardless of when your team/cohort begins activity the RESPONSIBLE PERSON must ensure:

- Equipment handouts will be scheduled by appointment to make sure the numbers are kept as low as possible (under 15 people Physically Distanced together at any given time). All personnel handing out equipment will be wearing PPE and wipe down the space used to equip at the end of each session. Proper Physical Distancing of 2M, will be practiced as much as possible.
- Prior to practice the Athletic Therapist or Responsible Person (or assigned individual) will do a roll call of participants to apply the Screening Checklist. If there is any doubt to whether any participant may be sick, they must then follow AHS protocols.
- Post practice all communal equipment (i.e. blocking dummies, footballs, pylons) will be wiped down with a disinfectant.
- All coaches will attempt as much as possible to keep Physically Distant (2M) from the participants and fellow adults during any team/cohort gathering. Team huddles and group gatherings will be as limited as possible and spread 2M apart when possible.
- Any time the team/cohort is using the sideline for a gathering place, all participants will maintain 2M distancing unless it is necessary (i.e. a trainer assessing an injured player).
- As a rule, all adult personnel on the sidelines that will possibly have close contact with the athletes (i.e. athletic therapists, equipment manager) will wear PPE’s.
- No other team/cohort gatherings will be permitted. Any “film work” or strategy sessions will be done on-line.
- Carpooling to practices/team events will be discouraged but family cohorts will be on their own to monitor their behavior in this circumstance.
- Spectators (excluding parents and guardians where necessary for player support) will be kept out of participant spaces (e.g., fields of play, sidelines). No spectators/parents will be allowed at practice unless the facility can allow for proper Physical Distancing in seating or areas away from the field of play or sidelines. The maximum number of spectators is determined by how many people the space can hold while keeping two meters of distance between attendees from different households/cohort families, up to a maximum of 100 persons. Unless from the same household, spectators should maintain a minimum two-meter distance from one another at all times, whether the activity is indoor or outdoor. It is strongly recommended that all spectators wear non-medical face masks. Cheering and yelling is strongly discouraged at this time as it presents a high risk of spreading droplets and no gathering of spectators will be allowed at practice sessions. Spectators at any permitted competitions will be regulated by the Stay and Play guidelines.

- There will be no team water stations or shared water bottles. Players will be 100% responsible for their hydration needs and must mark their own water bottles clearly and ensure it goes to and from the on-field session with them.
 - All players/coaches/staff/officials that wear football gloves must wipe them off with hand sanitizer prior to and at the conclusion of each practice or game session. They should also actively try to not touch their face at any time during the on-field sessions.
 - Locker room gatherings will be disallowed as well as all players and staff will come changed to the game or practice site. Any halftime meetings will have to be done on the sidelines.
 - To protect vulnerable populations such as people with compromised immune systems, underlying health problems or seniors; team/cohorts may consider some type of virtual method of engagement to discourage them from attending to watch their child. This may include FaceTime or Zoom type broadcast monitored by the Responsible Person. (Note: this does not mean parents can enter the field of play to broadcast – everything must be done from off-field and with proper Physical Distancing.
 - Participants will be encouraged to wipe down and disinfect their equipment after each session – particularly the helmet. Washing of the jersey and pants should be done at least once a week if not after every session.
 - Anyone found on in any club to have a positive test for COVID – 19 and have been exposed to the remainder of the participants in that club will cause the club to immediately be shut down and everyone who could have potentially been exposed required to arrange for a test. Only those who receive a negative result will be allowed to return and there will be no club activity until over 10 players per “team” are deemed to have tested negative.
2. This document will remain in effect until the Organization, per the direction of the provincial government and provincial health officials, determines that the acknowledgements in this Declaration of Compliance are no longer required.
 3. The Organization may remove an individual from the facility or from participation in the activities, programs or services of the Organization at any time and for any reason if the Organization believes, in its sole discretion, that the individual is no longer in compliance with any of the compliance standards described in this document.

Assumption of Risk Template

[INSERT NAME OF PSO]

INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT

(To be executed by Participants under the Age of 18)

WARNING! Please read carefully

By signing this document, you will assume certain risks and responsibilities

Participant's Name: _____

1. This is a binding legal agreement. Clarify any questions or concerns before signing. As a participant in the sport of _____ and the spectating, orientation, instruction, activities, competitions, programs, and services of *[Insert PSO]* and *[Insert Club]* (collectively the "Activities"), the undersigned, being the Participant and the Participant's Parent/Guardian (collectively the "Parties"), acknowledge and agree to the terms outlined in this document.

Disclaimer

2. *[Insert PSO]*, *[Insert Club]*, and their respective Directors, Officers, committee members, members, employees, coaches, volunteers, officials, participants, agents, sponsors, owners/operators of the facilities in which the Activities take place, and representatives (collectively the "Organization") are not responsible for any injury, property damage, death, expense, loss of income, damage or loss of any kind suffered by the Participant during, or as a result of, the Activities.

We have read and agree to be bound by paragraphs 1 and 2

Description and Acknowledgement of Risks

3. The Parties understand and acknowledge that:
 - a) The Activities have foreseeable and unforeseeable inherent risks, hazards and dangers that no amount of care, caution or expertise can eliminate, including without limitation, the potential for serious bodily injury, permanent disability, paralysis and loss of life;
 - b) The Organization may offer or promote online programming (such as webinars, remote conferences, workshops, and online training) which have different foreseeable and unforeseeable risks than in-person programming;
 - c) The Organization has a difficult task to ensure safety and it is not infallible. the Organization may be unaware of the Participant's fitness or abilities, may give incomplete warnings or instructions, may misjudge weather or environmental conditions, and the equipment being used might malfunction; and
 - d) **The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and COVID-19 is extremely contagious. The Organization has put in place preventative measures to reduce the spread of COVID-19; however, the Organization cannot guarantee that the Participant will not become infected with COVID-19. Further, participating in the Activities could increase the Participant's risk of contracting COVID-19.**

4. The Participant is participating voluntarily in the Activities. In consideration of that participation, the Parties hereby acknowledge that they are aware of the risks, dangers and hazards and may be exposed to such risks, dangers and hazards. The risks, dangers and hazards include, but are not limited to:
- a) Contracting COVID-19 or any other contagious disease;
 - b) The sport of _____;
 - c) Privacy breaches, hacking, technology malfunction or damage while interacting with online training;
 - d) Executing strenuous and demanding physical techniques;
 - e) Dryland training including weights, running, bands, and massage;
 - f) Vigorous physical exertion, strenuous cardiovascular workouts and rapid movements;
 - g) Exerting and stretching various muscle groups;
 - h) Physical contact with other participants;
 - i) Failure to act safely or within my own ability or designated areas;
 - j) Describe sport specific risks*
 - k) The failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
 - l) Serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of my body or to my general health and well-being;
 - m) Abrasions, sprains, strains, fractures, or dislocations;
 - n) Concussion or other head injuries, including but not limited to, closed head injury or blunt head trauma;
 - o) Spinal cord injuries which may render me permanently paralyzed;
 - p) Negligence of other persons, including other spectators or, participants, or employees; and
 - q) Travel to and from competitive events and associated non-competitive events which are an integral part of the Activities.

We have read and agree to be bound by paragraphs 3 and 4

Terms

5. In consideration of the Organization allowing the Participant to participate in the Activities, the Parties agree:
- a) That when the Participant practices or trains in their own space, the Parties are responsible for the Participant's surroundings and the location and equipment that is selected for the Participant;
 - b) That the Participant's mental and physical condition is appropriate to participate in the Activities and the Parties assume all risks related to the Participant's mental and physical condition;
 - c) To comply with the rules and regulations for participation in the Activities;
 - d) To comply with the rules of the facility or equipment;
 - e) That if the Participant observes an unusual significant hazard or risk, the Participant will remove themselves from participation and bring their observations to a representative of the Organization immediately;
 - f) The risks associated with the Activities are increased when the Participant is impaired and the Participant will not participate if impaired in any way;
 - g) That it is their sole responsibility to assess whether any Activities are too difficult for the Participant. By the Participant commencing an Activity, they acknowledge and accept the suitability and conditions of the Activity;
 - h) That COVID-19 is contagious in nature and the Participant may be exposed to, or infected by, COVID-19 and such exposure may result in personal injury, illness, permanent disability, or

- death; and
- i) That they are responsible for the choice of the Participant’s safety or protective equipment and the secure fitting of that equipment.
6. In consideration of the Organization allowing the Participant to participate, the Parties agree:
- a) That the Parties are not relying on any oral or written statements made by the Organization or their agents, whether in brochure or advertisement or in individual conversations, to agree to participate in the Activities;
 - b) That the Organization is not responsible or liable for any damage to the Participant’s vehicle, property, or equipment that may occur as a result of the Activities; and
 - c) That this Agreement is intended to be as broad and inclusive as is permitted by law of the Province of Manitoba and if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect.

Jurisdiction

7. The Parties agree that in the event that they file a lawsuit against the Organization, they agree to do so solely in the Province of Manitoba and they further agree that the substantive law of the Province of Manitoba will apply without regard to conflict of law rules.

We have read and agree to be bound by paragraphs 5-7

Acknowledgement

8. The Parties acknowledge that they have read this agreement and understand it, that they have executed this agreement voluntarily, and that this Agreement is to be binding upon themselves, their heirs, their spouses, parents, guardians, next of kin, executors, administrators and legal or personal representatives.

_____	_____	_____
Name of Participant (print)	Signature of Participant	Date of Birth

_____	_____
Name of Parent or Guardian (print)	Signature of Parent or Guardian

Date