

## COVID-19 Waiver – 2021

Due to the COVID-19 pandemic, we are taking extra precautions with the intake of each client. Please answer these questions truthfully so we may continue to do our best to support you. If you show symptoms of COVID-19 or any illness, we will re-book.

1. Have you recently experienced any flu-like symptoms such as; sore throat, runny nose, headache, difficulty breathing, cough, loss of appetite, loss of smell, shortness of breath, fever, chills, fatigue, or muscle ache? YES \_ NO
2. Have you travelled to any countries outside of Canada within the past 14 days, included anywhere outside of the province? YES \_\_\_\_\_ NO \_\_\_\_\_
3. Have you had close contact with a person with confirmed or suspected COVID-19? YES \_\_\_\_\_ NO
4. Have you been in close contact with a person that has travelled outside of Canada within the past 14 days? YES \_\_\_\_\_ NO

### COVID-19 screening questionnaire informed consent

- I certify that the above information is correct to my knowledge.

I understand that while **Maggie Calder and her team** follow all health and safety guidelines outline by **WorkSafeBC** and the **Provincial Health Office**, that they are taking all reasonable precautions to clean and disinfect all surfaces in the bodywork room and classroom that there are **NO Guarantees** that I may not come into contact with COVID-19.

- I agree

### Cancellation COVID-19 Agreement

I confirm that if I answer YES to any of these questions above, I will cancel my appointment(s) and or classes immediately.

Date: \_\_\_\_\_ Name: \_\_\_\_\_ Phone#: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Signature: