

COVID CONSENT FORM

Fidalgo Pool & Fitness Center (FPFC) is permitted to operate under Phases 1.5 and 2 of the Safe Start Plan, as issued by the State of Washington. Under these phased orders, there are several stringent requirements that must be met. In signing this Consent Form, Patron or Employee agrees to strictly adhere to the following:

- Maintain social distancing of at least six (6) feet at all times.
- Enter through the front door and exit through either the east door from the pool deck (pool activities), the east Fitness Center door (gym activities) or the upstairs lobby doors (group fitness activities), creating a one-way flow.
- Locker rooms may be used only for handwashing or as a restroom facility for Fitness Center and group fitness users. Pool users may change and must shower prior to entering the pool. Personal items must still be taken out to the pool deck. No personal items should be left in the locker rooms.
- Masks are required for all employees and for patrons over the age of five (recommended for children aged 2 – 5-years), except those with medical conditions that prohibit the use of masks. Pool users shall wear their mask until prepared to enter the pool, at which time they can unmask. Upon emerging from the pool, patrons will re-mask. They may choose to re-enter the locker room, shower and change or may exit immediately. Fitness Center and Group Fitness users shall wear their masks unless exercising strenuously, at which point they may unmask.
- Water fountains may be used for filling water bottles only.
- Sanitizing stations are located throughout the building. Hand washing & sanitizing should be undertaken regularly when on the premises.
- Fitness Center and Group Fitness users will sanitize any equipment before & after use.
- Patrons or staff that feel ill shall not enter the facility.
- Patrons or staff that test positive for COVID shall immediately notify FPFC management so that remediation procedures may be implemented.

Anyone who fails to adhere to the above requirements will be asked to leave the facility.

I understand and agree to these state-mandated conditions.

Signature

Printed Name

Date