SPLASH 'N' PLAY/DIVE 'N' PLAY HOUSEHOLD SWIM 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 requirements that must be met. In signing this Consent Form, Patron agrees that their household will strictly adhere to the following:

- Anyone with respiratory symptoms (cough, runny nose, etc.), fever or other illness will NOT be allowed in the building.
- Masks are required while on the pool deck or locker rooms. Masks may be removed when in the water.
- All members of the group must shower in the locker room prior to entering the pool.
- Personal belongings will be placed on one of the Personal Belonging Tables on the pool deck as directed by facility staff.
- All members of the group must be in the water. No deck or balcony spectators.
- At least one adult over the age of 18 must be in the water with the group.
- Children age 7 or younger must always have an adult buddy within arm's reach, including in the pool and on the deck.
- Households will maintain social distancing of at least six feet from other users not in their party.
- Households may not mingle or switch sides with any party using the other half of the pool.
- 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 attest that all members of my party live in the same household. I also understand and agree to these statemandated conditions.

CANCELLATION/NO-SHOW POLICY: Full refund up to 7 days in advance, 50% refund 72 hours in advance. Thereafter, we are happy to reschedule your swim for a later date. We are unable to provide a refund for no-shows.

| Signature | |
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| Printed Name | Date |
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| FOR OFFICE USE ONLY | |
| Name of patron making reservation: | |
| Phone number: Email | |
| No. in group (max. 10): Slide Side: | Shallow Side: Slide (Y/N?): |
| Reservation Date/Time: | Paid Invoice emailed (date): |
| Consent Form emailed (date): Signed Cor | usent Form received (date/staff initials): |