## 2020 Pole Green Park 5K Waiver and Health Status (October 3)

All participants are required to sign a waiver and monitor their health status by completing this COVID-19 symptom screening:

TEMPERATURE CHECK Under 100.3 degrees	? [	]	YES	]	] N	0
In the past 7 days, have you?  • Tested positive for COVID-19  • Been in contact with someone who has tested.  • Been contacted by a health department office COVID-19  [ ] YES [ ] NO						)
Are you experiencing one or more of the follow attributed to another health condition?  Cough Shortness of breath or difficulty breathing New loss of taste or smell Headache Muscle or body aches Sore throat Congestion or runny nose Nausea or vomiting Diarrhea [] YES [] NO	ing sy	/mp	toms tl	nat CAI	NNO1	Γbe
In consideration of this entry being accepted, I, intending my heirs, executors, administrators, waive and release a organizations (including, but not limited to the Collegian and USATF) holding this event, its agents, representative injuries suffered by me at said race. I also consent to the event by the race organizers or their agents. Please discompeting in our races. Bandits consume scare resource results. Unregistered runners, running with dogs, strolled of headphones are prohibited on the race course at any the comply with liability insurance standards. Additionally, participating is such an event.	ny and te Rung tes, successes, successes ourage to and comments ime to	all r ning ccess any unof can d erbla	Associa Associa sors and photographicial endelay or index, bic are runne	may have ation, Ha assigns raphs tal atrants (b inhibit a ycles an ers safet	e again nover for an ken at candita ccurated d the	nst the County y and al said s) from te race wearing to
SIGNATURE:			Da	ate: _		
Guardian or Coach SIGNATURE (if under 18):						