



**Health Declaration, Code of Conduct, Assumption of Risks,  
Release of Liability and Waiver of Claims**

**Please Read Carefully!**

**Due to the COVID-19 situation in Canada, the continued operation of this facility requires full cooperation from all of our guests. Please take the time to read, understand and comply with the information contained in this document. This document must be completed in full by the registered guest or head of the group before admission to the facility is granted. Additional copies of this document are available upon request.**

<b>Name of Registered Day Visitor</b>	Last	First	Middle Initial
<b>Address</b>	Street	City	
	Prov/State	Country	Postal/Zip Code
<b>Telephone</b>	Mobile	Other	
<b>Email</b>			

Registered Guest You Are Visiting

Registered Guest's Last Name	Registered Guest's First Name	Date(s) You Are Visiting
1.		

Please list the names of all members of your group (4 maximum):

Last Name	First Name	Relationship to Registered Guest
1.		
2.		
3.		
4.		

## HEALTH DECLARATION

**I confirm that neither I nor the members of my group listed on this form have tested positive for COVID-19 in the past 21 days nor has any one of us been in contact with someone who has tested positive within the last 21 days.**

\*Exceptions may be made in cases where guests are required to self-quarantine for 14 days, pursuant to the Quarantine Act. These guests will be expected to display a sign on their unit or RV indicating that they are in quarantine and must not come into contact with anyone at the RV park/campground.

Signature of Day Visitor

Date (dd/mmm/yyyy)

## CODE OF CONDUCT

### STAY INFORMED

- Please be aware of the inherent risk of exposure to COVID-19 during your attendance at or use of the premises and facilities at the Resort, Campground or RV Park (the "Premises), and participation in the activities on the Premises. Information on restrictions and limitations is posted throughout the Premises, and is available in the office.

### MITIGATING RISK

- Please maintain social distancing requirements and standards, practice good hand hygiene, and consciously act to reduce the risk to everyone on the Premises. Always respect the signage and Premises rules to minimize risk to yourself. Please inform us immediately if any member of your group tests positive for COVID-19 or develops symptoms while on the Premises or following your stay with us.

### PARENTAL SUPERVISION OF CHILDREN

- It is the responsibility of parents or guardians to supervise children and ensure that they maintain a 2-metre (6 feet) distance from persons in other groups at all times while on the Premises.

### FACILITIES

- Several on-site facilities on the Premise are currently closed as per local health authority regulations. The facilities listed below are not accessible until further notice:

<input type="checkbox"/> Bathroom/Toilet	<input type="checkbox"/> Laundry Room	X Pool/Splash Pad
<input type="checkbox"/> Showers	X Camp/Convenience Store	<input type="checkbox"/> Playground
	<input type="checkbox"/> Recreational Facilities	<input type="checkbox"/> (Other: _____)

## **ASSUMPTION OF RISKS, RELEASE OF LIABILITY AND WAIVER OF CLAIMS**

**I AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH THE USE OF THE PREMISES AND PARTICIPATING IN ACTIVITIES ON THE PREMISES. I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.**

**I HAVE EXPLAINED THE RISKS, DANGERS AND HAZARDS TO MEMBERS OF MY GROUP LISTED ON THIS FORM.**

**I, ON MY BEHALF AND ON BEHALF OF MEMBERS OF MY GROUP, AGREE AS FOLLOWS:**

**TO WAIVE ANY AND ALL CLAIMS that we have or may in the future have against the operators of the Premises and their directors, officers, employees and representatives ( collectively the "Releasees), AND TO RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury including death that we may suffer, or that our next of kin may suffer, as a result of our use of or attendance at the Premises or participation in activities on the Premises DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE ON THE PART OF THE RELEASEES. I UNDERSTAND THAT NEGLIGENCE INCLUDES FAILURE ON THE PART OF THE RELEASEES TO TAKE REASONABLE STEPS TO SAFEGUARD OR PROTECT ME FROM OR WARN ME OF THE RISKS, DANGERS AND HAZARDS REFERRED TO ABOVE.**

**Signature of Day Visitor**

**Date (dd/mmm/yyyy)**